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COUNTY OF LINCOLN — PARTS OF LINDSEY



ANNUAL REPORT

OF THE

COUNTY MEDICAL OFFICER OF HEALTH

FOR THE YEAR

1956



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COUNTY MEDICAL OFFICER OF HEALTH

FOR THE YEAR

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C. D. CORMAC, M.A., B.M., B.Ch., D.P.H.
County Medical Officer of Health

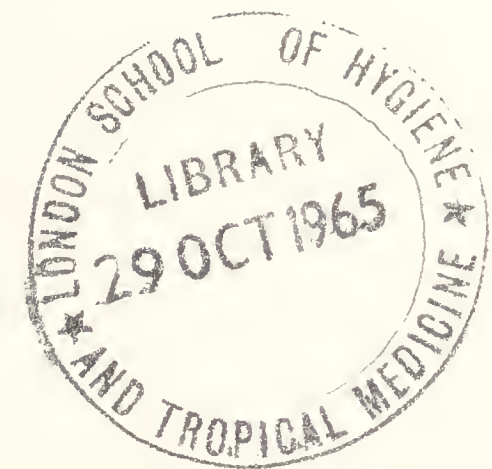


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PUBLIC HEALTH OFFICERS OF THE AUTHORITY

County Medical Officer of Health

CYRIL D. CORMAC, M.A., B.M., B.Ch., D.P.H.

Senior Assistant County Medical Officer of Health

H. HARTLEY DAVIES, M.R.C.S., L.R.C.P., D.C.H.

Assistant County Medical Officers

JOHN C. MACARTNEY, M.D., Ch.B., D.P.H.

WILLIAM J. KERRIGAN,

M.B., Ch.B., B.A.O., L.M., D.P.H.

RALPH J. R. MECREDY,

B.A., M.B., B.Ch., B.A.O., D.P.H.

STANLEY A. O'HAGAN, M.B., B.S., D.P.H.

SIDNEY CHILDS, M.A., L.R.F.P., & S.G., M.B., Ch.B.
D.P.H., D.P.A., D.T.M. & H.

CECIL A. McCLEARY, M.B., B.Ch., B.A.O., D.P.H.

ARTHUR J. BEVERIDGE,

C.B., O.B.E., M.C., M.B., B.Ch., B.A.O., L.M., M.Sc., D.P.H.

DOROTHY W. O'HAGAN, M.B., B.S.

DORIS S. WILLIAMS, M.B., Ch.B., D.P.H.

ISABELLA M. HARKNESS, M.B., Ch.B., D.P.H.

MARGARET J. S. CATON, M.R.C.S., L.R.C.P.,

(Resigned 6/1/56).

MARY HELMER, M.R.C.S., L.R.C.P. M.B., B.S.,

D.R.C.O.G. (Resigned 2/6/56).

KRYSTYNA M. KAWA, M.B., Ch.B., D.R.C.O.G.,

(Resigned 14/8/56).

KATHLEEN A. CLYNE, M.D., B.Ch., B.A.O.

(Temporary—appointed 28/5/56).

WILHELMINA SHANKS B.A., M.B., B.Ch., B.A.O.

(Appointed 23/4/56).

SHIRLEY E. HOYES, M.R.C.S., L.R.C.P.

(Appointed 27/7/56).

MARGARET T. WOOD, D.Obst. R.C.O.G., M.B., Ch.B.

(Appointed 8/10/56).

Chief County Dental Officer

JOHN D. SYKES, L.D.S.

Assistant County Dental Officers

GEORGE H. TAPPER, L.D.S., R.C.S.

FRANCIS G. HOLLIER, L.D.S., R.C.S.

MARY CLAYTON, L.D.S.

JOAN MUNRO, L.D.S., R.C.S.

(Appointed 12/3/56—Resigned 3/8/56)

FRANK E. PADGETT, L.D.S., R.C.S.

ARTHUR N. STANNARD, L.D.S. (Part-time)

DOUGALD R. STORR, L.D.S.

DIGBY F. CAME, L.D.S., R.C.S. (Apptd. 11/9/56).

County Health Inspector

GEORGE COLLINSON, D.P.A., M.A.P.H.I.

Assistant County Health Inspectors

ARTHUR HENRY RANDS, M.A.P.H.I.

JOHN CABOURNE, M.A.P.H.I.

Superintendent Nursing Officer

MARY WITTING, S.R.N., S.C.M., Health Visitors Cert. of R.S.H.

Assistant Superintendent Nursing Officers

VIOLET L. MONAGHAN, S.R.N., S.C.M.

AGNES W. MATHER S.R.N., S.C.M., Health Visitors Cert. of R.S.H.

Domestic Help Organiser

Mrs. LILLIAN ELLERAY

Chief Clerk

CHARLES H. NICHOLSON

Public Analyst

WILLIAM W. TAYLOR, B.Sc., F.R.I.C.

Authorised Officers under the Lunacy and Mental Treatment Acts and for the purposes of Section 15 (1) of the
Mental Deficiency Act, 1913

G. G. BECK, 48 Oswald Road, Scunthorpe.

A. JAMES, 48 Oswald Street, Scunthorpe.

F. SLINGSBY, 31 Market Street, Cleethorpes.

C. L. VICKERS, 5 Silver Street, Gainsborough.

A. V. SMITH, County Offices, Lincoln.

C. L. WINK, 14 Upgate, Louth.

J. N. RADFORD, Offord House, Spilsby.

B. G. WILLIAMS, 32 Cecil Avenue, Skegness.

DISTRICT MEDICAL OFFICERS OF HEALTH

District	Name	Qualifications	Address
URBAN			
Alford	C. S. E. Wright	B.A., M.B., B.Ch., M.R.C.S., L.R.C.P. D.P.H.	Council Offices, Alford
Barton-upon-Humber...	F. P. H. Birtwhistle	M.D., M.B., Ch.B.	Priestgate, Barton-upon-Humber
Brigg	F. J. O. King (resigned 31/3/56) J. H. Willis, temporary from 1/4/56)	B.A., M.B., B.Ch. B.A.O. M.B., B.S.	53 Bridge Street, Brigg
Cleethorpes Borough...	C. A. McCleary	M.B., B.Ch., B.A.O., D.P.H.	Health Dept., Council Offices, Cleethorpes.
Gainsborough	J. C. Macartney	M.D., Ch.B., D.P.H.	Health Dept., Council Offices, Lord Street, Gainsborough
Horncastle	S. A. O'Hagan	M.B., B.S., D.P.H.	Council Offices, Horncastle
Louth Borough	W. J. Kerrigan	M.B., Ch.B., B.A.O., D.P.H.	Health Dept., Town Hall, Louth
Mablethorpe and Sutton	W. J. Kerrigan	M.B., Ch.B., B.A.O., D.P.H.	Council Offices, Mablethorpe
Market Rasen	R. J. R. Mecredy	B.A., M.B., B.Ch., B.A.O., D.P.H.	Council Offices, Market Rasen
Scunthorpe Borough	S. Childs	M.A., M.R.F.P. & S.G., M.B., Ch.B., D.P.H., D.P.A., D.T.M., & H.	Health Dept., High Street East, Scunthorpe
Skegness	A. D. F. Menzies	M.B., Ch.B.	Health Dept., Town Hall, Skegness
Woodhall Spa	S. A. O'Hagan	M.B., B.S., D.P.H.	Council Offices, Horncastle
RURAL			
Caistor	R. J. R. Mecredy	B.A., M.B., B.Ch., B.A.O., D.P.H.	Council Offices, Caistor
Gainsborough	J. C. Macartney	M.D., Ch.B., D.P.H.	Council Offices, Lord Street, Gainsborough
Glanford Brigg	F. J. O. King (resigned 31/3/56) J. H. Willis (temporary from 1/4/56)	B.A., M.B., B.Ch., B.A.O. M.B., B.S.	53 Bridge Street, Brigg
Grimsby	C. A. McCleary	M.B., B.Ch., B.A.O., D.P.H.	Health Dept., Council Offices, Deansgate, Grimsby
Horncastle	S. A. O'Hagan	M.B., B.S., D.P.H.	Council Offices, Horncastle
Isle of Axholme	J. C. Macartney	M.D., Ch.B., D.P.H.	Council Offices, Epworth, Doncaster
Louth	W. J. Kerrigan	M.B., Ch.B., B.A.O., D.P.H.	Council Offices, Cannon Street, Louth
Spilsby	C. S. E. Wright	B.A., M.B., B.Ch., M.R.C.S., L.R.C.P. D.P.H.	Council Offices, Toynton All Saints, Spilsby
Welton	W. Sharrard	M.B., Ch.B.	"Elmhurst," The Avenue Lincoln

VITAL STATISTICS, 1956

Registrar General's estimated mid-year population										...	...	...	...	...	...	...	316,800
Births																	
Live 5,303.		Still 157.		Total		5,460		Total Birth-Rate per 1,000 population						17.23			
								Stillbirths-Rate per 1,000 total births						28.8			
Illegitimate births		...		...		...		292		Illegitimate Births-Rate per 1,000							
														total births		53.5	
Deaths																	
from all causes		...		...		...		3,517		Death rate per 1,000 population						11.1	
Deaths of infants under 1 year of age								123		Rate per 1,000 births						22.5	
Maternal deaths		...		...		...		1		Rate per 1,000 births						0.18	
Deaths from Tuberculosis																	
Pulmonary		...		...		...		26		Rate per 1,000 population						0.08	
Other forms		...		...		...		5		Rate per 1,000 population						0.016	
Deaths from Cancer		...		...		...		498		Rate per 1,000 population						1.57	

The births and death rates for the Administrative County continue to compare favourably with those of England and Wales. After correction for the difference in the age and sex distribution of the population the comparative figures are as follows:—

			<i>Live births rate for 1,000 population</i>	<i>Death rate for 1,000 population</i>
England and Wales	...	...	15.7	11.7
Administrative County	...	...	16.7	11.2

Live Births 1956

Districts	Total Births	Legitimate		Illegitimate	
		male	female	male	female
Urban					
Alford	34	15	17	1	1
Barton-upon-Humber ...	101	51	49	1	—
Brigg	68	35	32	—	1
Cleethorpes Borough ...	482	248	212	11	11
Gainsborough	329	146	156	15	12
Horncastle	51	22	27	1	1
Louth Borough	175	81	82	6	6
Mablethorpe and Sutton	80	35	38	3	4
Market Rasen	33	19	14	—	—
Scunthorpe Borough ...	1,093	540	496	27	30
Skegness	202	110	69	12	11
Woodhall Spa	24	18	6	—	—
Aggregate Urban Districts	2,672	1,320	1,198	77	77
Rural					
Caistor	253	135	105	4	9
Gainsborough	228	105	107	7	9
Glanford Brigg	493	242	233	14	4
Grimsby	255	123	120	6	6
Horncastle	193	103	82	3	5
Isle of Axholme... ..	255	134	109	4	8
Louth	298	144	138	8	8
Spilsby	356	168	172	10	6
Welton	300	157	130	7	6
Aggregate Rural Districts	2,631	1,311	1,196	63	61
Whole County	5,303	2,631	2,394	140	138

Still-Births 1956

Districts	Total	Legitimate		Illegitimate	
		male	female	male	female
Urban					
Alford	2	—	2	—	—
Barton-upon-Humber ...	8	2	6	—	—
Brigg	1	—	1	—	—
Cleethorpes Borough ...	19	13	6	—	—
Gainsborough	9	4	4	—	1
Horncastle	1	1	—	—	—
Louth Borough	6	4	2	—	—
Mablethorpe and Sutton	2	—	1	1	—
Market Rasen	1	1	—	—	—
Scunthorpe Borough ...	30	14	13	1	2
Skegness	6	2	2	1	1
Woodhall Spa	3	1	2	—	—
Aggregate Urban Districts	88	42	39	3	4
Rural					
Caistor	5	2	3	—	—
Gainsborough	7	3	4	—	—
Glanford Brigg	18	12	4	2	—
Grimsby	2	2	—	—	—
Horncastle	10	2	6	2	—
Isle of Axholme... ..	9	4	5	—	—
Louth	9	4	5	—	—
Spilsby	6	2	1	2	1
Welton	3	2	1	—	—
Aggregate Rural Districts	69	33	29	6	1
Whole County	157	75	68	9	5

Table giving for each County District, in respect of year 1956, population,

District	Registrar General's estimated population	Live Births	Deaths	Tuberculosis, respiratory	Tuberculosis, other	Syphilitic disease	Diphtheria	Whooping cough	Meningococcal infections	Acute poliomyelitis	Measles	Other infective and parasitic diseases	Malignant neoplasm stomach	Malignant neoplasm, lung, bronchus	Malignant neoplasm, breast	Malignant neoplasm uterus	Other malignant and lymphatic neoplasms	Leukaemia, Aleukaemia	Diabetes
Urban																			
Alford	2,150	34	24	—	—	—	—	—	—	—	—	1	2	—	—	—	3	1	—
Barton upon Humber	6,420	101	86	—	—	—	—	—	—	—	—	—	1	3	3	—	8	—	1
Brigg	4,390	68	68	—	—	1	—	—	—	—	—	—	2	1	2	—	9	—	1
Cleethorpes Borough	30,320	482	355	4	—	—	—	—	—	—	—	—	11	12	1	1	27	2	3
Gainsborough ...	17,440	329	240	2	—	—	—	—	—	—	—	—	7	6	1	3	20	—	3
Horncastle ...	3,880	51	40	1	—	1	—	—	—	—	—	—	—	—	1	—	2	—	1
Louth Borough ...	11,430	175	156	2	—	—	—	1	—	—	—	—	3	3	2	—	9	1	2
Mablethorpe and Sutton	5,260	80	60	1	—	—	—	—	—	—	—	1	—	2	5	1	4	—	—
Market Rasen ...	2,160	33	30	—	—	—	—	—	—	—	—	—	3	—	1	—	1	—	—
Scunthorpe Borough	58,760	1093	496	5	2	2	—	—	—	—	—	1	10	20	1	3	36	2	10
Skegness	12,630	202	172	3	—	—	—	—	—	—	—	—	7	7	2	1	13	—	1
Woodhall Spa ...	2,160	24	47	—	—	—	—	—	—	—	—	—	1	—	—	—	5	—	—
Total ...	157,000	2672	1774	18	2	4	—	1	—	—	—	3	47	54	19	9	137	6	22
Rural																			
Caistor	14,370	253	176	—	—	—	—	—	—	—	—	—	1	2	3	1	6	2	4
Gainsborough ...	13,740	228	135	—	—	—	—	—	—	—	—	—	3	1	3	—	7	—	—
Glanford Brigg ...	32,980	493	318	2	—	1	—	—	1	—	—	—	7	12	4	1	23	—	2
Grimsby	14,180	255	129	2	—	—	—	1	—	—	—	—	3	3	—	—	18	—	—
Horncastle ...	12,550	193	115	—	—	—	—	—	—	—	—	2	1	5	—	—	10	—	1
Isle of Axholme	14,290	255	183	2	2	1	—	—	1	—	—	—	4	2	1	—	18	3	1
Louth	18,210	298	204	—	1	—	—	—	—	—	—	—	3	1	3	2	14	—	2
Spilsby	23,500	356	308	1	—	—	—	—	—	—	—	1	7	4	3	4	30	1	2
Welton	15,980	300	175	1	—	—	—	—	—	—	—	—	3	2	3	4	10	—	1
Total ...	159,800	2631	1743	8	3	2	—	1	2	—	—	3	32	32	20	12	136	6	13
Total for Admini- strative County	316,800	5303	3517	26	5	6	—	2	2	—	—	6	79	86	39	21	273	12	35

number of births and deaths, together with analysis of causes of death.

Vascular lesions of nervous system	Coronary disease, angina	Hypertension with heart disease	Other heart disease	Other circulatory disease	Influenza	Pneumonia	Bronchitis	Other diseases of respiratory system	Ulcer of stomach and duodenum	Gastritis, enteritis and diarrhoea	Nephritis and nephrosis	Hyperplasia of prostate	Pregnancy, ect. birth abortion	Congenital malformations	Other defined and ill-defined diseases	Motor vehicle accidents	All other accidents	Suicide	Homicide and operations of war	District
1	4	—	1	2	—	1	2	—	—	—	1	—	—	1	3	—	1	—	—	Urban
13	10	5	15	3	—	7	4	1	—	—	—	1	—	1	7	—	1	2	—	Alford
12	9	—	13	1	—	1	—	1	—	—	1	—	—	—	11	—	3	—	—	Barton-upon-Humber
52	42	11	51	19	1	24	16	7	9	—	1	4	—	1	40	3	10	3	—	Brigg
26	39	11	32	9	—	3	18	2	—	—	2	8	—	5	37	—	5	1	—	Cleethorpes Borough
5	7	1	8	1	—	2	—	—	1	—	—	2	—	—	5	1	—	1	—	Gainsborough
16	19	3	26	22	—	8	9	2	2	1	2	—	—	1	18	—	4	—	—	Horncastle
8	12	—	14	2	—	1	1	—	1	—	—	3	—	—	4	—	—	—	—	Louth Borough
5	4	2	5	—	1	—	2	—	—	1	—	—	—	—	4	1	—	—	—	Mablethorpe and Sutton
65	100	10	57	23	2	19	22	4	5	—	5	6	—	7	52	10	11	4	2	Market Rasen
28	18	6	39	8	—	7	2	1	3	1	1	1	1	2	13	2	4	—	1	Scunthorpe Borough
6	5	2	10	3	—	5	—	—	1	—	—	—	—	—	5	—	3	1	—	Skegness
																				Woodhall Spa
237	269	51	271	93	4	78	76	18	22	3	13	25	1	18	199	17	41	13	3	Total
25	35	6	35	16	3	5	3	—	—	3	2	1	—	1	16	—	3	3	—	Rural
24	16	2	29	4	1	5	4	3	1	—	5	2	—	—	15	3	5	2	—	Caistor
35	51	7	68	17	—	8	12	4	3	—	5	5	—	1	29	5	12	3	—	Gainsborough
18	17	4	16	8	—	9	5	1	3	—	1	—	—	1	13	1	3	2	—	Glanford Brigg
16	20	5	14	13	1	3	1	—	—	—	—	1	—	2	13	2	2	3	—	Grimsby
35	27	6	21	2	1	5	12	2	2	—	4	1	—	2	22	3	1	2	—	Horncastle
35	34	1	32	18	1	11	7	3	—	—	—	1	—	2	23	5	4	1	—	Isle of Axholme
48	42	8	84	12	—	4	5	5	1	4	3	5	—	2	20	3	5	4	—	Louth
23	24	5	39	7	10	12	2	2	2	—	2	1	—	3	13	4	1	—	1	Spilsby
																				Welton
259	266	44	338	97	17	62	51	20	12	7	22	17	—	14	164	26	36	20	1	Total
496	535	95	609	190	21	140	127	38	34	10	35	42	1	32	363	43	77	33	4	Total for Administrative County

Causes of all deaths in the County at different ages, 1956

Causes of death	0—	1—	5—	15—	25—	45—	65—	75 and over	Total
1. Tuberculosis, respiratory	—	—	—	—	12	4	9	1	26
2. Tuberculosis, other	—	—	1	1	2	—	1	—	5
3. Syphilitic disease	—	—	—	—	—	2	2	2	6
4. Diphtheria	—	—	—	—	—	—	—	—	—
5. Whooping cough	2	—	—	—	—	—	—	—	2
6. Meningococcal infections	1	1	—	—	—	—	—	—	2
7. Acute poliomyelitis	—	—	—	—	—	—	—	—	—
8. Measles	—	—	—	—	—	—	—	—	—
9. Other infective and parasitic diseases	—	—	—	1	3	2	—	—	6
10. Malignant neoplasm, stomach ...	—	—	—	—	1	22	27	29	79
11. Malignant neoplasm, lung bronchus	—	—	—	—	12	46	24	4	86
12. Malignant neoplasm, breast	—	—	—	—	5	18	8	8	39
13. Malignant neoplasm, uterus	—	—	—	—	1	7	3	10	21
14. Other malignant and lymphatic neoplasms	—	—	2	1	13	64	88	105	273
15. Leukaemia, aleukaemia	—	2	—	—	2	2	2	2	12
16. Diabetes	—	—	—	—	2	8	12	13	35
17. Vascular lesions of nervous system	—	—	—	—	5	64	136	291	496
18. Coronary disease, angina	—	—	—	—	7	147	178	203	535
19. Hypertension with heart disease ...	—	—	—	1	—	11	38	45	95
20. Other heart disease	1	—	—	1	12	42	110	443	609
21. Other circulatory disease	—	—	—	1	—	29	43	117	190
22. Influenza	—	—	—	—	—	2	4	15	21
23. Pneumonia	16	4	1	—	3	23	21	72	140
24. Bronchitis	4	—	—	—	1	25	39	58	127
25. Other diseases of respiratory system...	2	—	—	2	2	12	6	14	38
26. Ulcer of stomach and duodenum ...	2	—	—	—	1	10	9	12	34
27. Gastritis, enteritis and diarrhoea ...	1	—	—	—	—	2	4	3	10
28. Nephritis and nephrosis	—	—	—	—	5	10	12	8	35
29. Hyperplasia of prostate	—	—	—	—	—	—	8	34	42
30. Pregnancy, childbirth, abortion ...	—	—	—	—	1	—	—	—	1
31. Congenital malformations	23	2	2	1	1	1	1	1	32
32. Other defined and ill-defined diseases	69	8	3	2	21	44	52	164	363
33. Motor vehicle accidents	—	—	7	11	9	11	3	2	43
34. All other accidents	2	4	1	2	10	21	10	27	77
35. Suicide	—	—	—	1	4	15	8	5	33
36. Homicide and operations of war ...	—	—	—	—	1	3	—	—	4
Total ...	123	21	18	26	136	647	858	1688	3517

INFANT AND CHILD MORTALITY

Causes of all deaths between ages 0—16 years for 1956

During the year 1956 168 children between 0—16 years of age died. In 1947 the figure was 332 and it will be seen, therefore, that since that time the annual number of deaths has been halved, in spite of the fact that there has been a considerable increase in the population of this age group. The tables which follow show the cause of death and the stage in the life of the child at which death occurred.

Causes of death in infants during first week of life

<i>Cause</i>	<i>Number of deaths</i>	<i>Percentage of total deaths in this age group</i>	<i>Percentage of total deaths among children up to 16 years of age</i>
Prematurity ...	41	53.9	20.6
Congenital defects	11	14.5	6.5
Birth injuries ...	8	10.5	4.7
Respiratory diseases	7	9.2	4.2
Atelectasis ...	5	6.6	3.0
Other causes ...	3	3.9	1.8
Accident or Misadventure	1	1.3	.6
	76	100.0	45.3

Prematurity is still by far the greatest single cause of death in this group. The statistics show no improvement in the position over the previous year. Indeed there is by comparison a deterioration as far as some of the causes are concerned for although the total number of deaths from prematurity in 1956 was the same as in 1955 the total number of deaths in this group decreased from 94 in 1955 to 76 in 1956.

Causes of death in infants 1 week—1 month of age

<i>Cause</i>	<i>Number of deaths</i>	<i>Percentage of total deaths in this age group</i>	<i>Percentage of total deaths among children up to 16 years of age</i>
Congenital defects	9	42.9	5.3
Respiratory diseases	5	23.9	3.0
Infection ...	5	23.9	3.0
Accident ...	1	4.7	.6
Other causes ...	1	4.7	.6
	21	100.0	12.5

From these tables it will be seen that no premature child who survived the first week, died of prematurity at a later date. It might be justly said that this is an indication of the high standard of medical and nursing care bestowed upon the infants, both at home and in hospital.

Congenital defects still heads the list in this group. Medical research is still a long way from discovering the causes but it is obvious that they are genetic and therefore not foreseeable.

Respiratory disease and infection figure more prominently as causes of death than one would hope to find in this group and it is regrettable that the number of deaths due to infection has increased considerably compared with the figure for 1955.

Causes of death in infants 1 month—3 months of age

<i>Cause</i>	<i>Number of deaths</i>	<i>Percentage of total deaths in this age group</i>	<i>Percentage of total deaths among children up to 16 years of age</i>
Respiratory disease	6	67.0	3.6
Congenital defects	1	11.0	0.6
Infection ...	1	11.0	0.6
Accident ...	1	11.0	0.6
Other causes ...	1	11.0	0.6
	9	100.0	5.4

This is a quiet period in a child's life. The threat of loss of life from prematurity or congenital defects has largely gone. Infection remains to be met, but at this period the child's social environment remains fairly constant, and contact with infection is usually confined to respiratory infection. Though there were six deaths from respiratory causes, on the whole, this group was very healthy and accounted for only 5.4% of all deaths up to 16 years of age.

Causes of death in infants 3 months—1 year of age

<i>Cause</i>	<i>Number of deaths</i>	<i>Percentage of total deaths in this age group</i>	<i>Percentage of total deaths among children up to 16 years of age</i>
Respiratory disease	12	66.7	10.7
Infections ...	4	22.2	2.7
Congenital defects	1	5.5	0.6
Other causes ...	1	5.5	0.6
	18	100.0	14.6

In this group respiratory disease and other infections take a heavy toll of life, accounting for sixteen of the eighteen deaths.

Causes of death in infants 1—5 years of age

<i>Cause</i>	<i>Number of deaths</i>	<i>Percentage of total deaths in this age group</i>	<i>Percentage of total deaths among children up to 16 years of age</i>
Respiratory disease	7	28	4.1
Accidents or Misadventure	6	24	3.5
Infection ...	6	24	3.5
Congenital defects	2	8	1.2
Other causes ...	4	16	2.4
	25	100	14.7

Of all the deaths in this group, almost a quarter are accidental in origin and it is indeed a misfortune that preventive and curative medicine should have combined to reduce the number of deaths due to illness and disease only to find this reduction largely offset by the number of deaths due to accidents.

Causes of deaths in children 5—16 years of age

<i>Cause</i>	<i>Number of deaths</i>	<i>Percentage of total deaths in this age group</i>	<i>Percentage of total deaths among children up to 16 years of age</i>
Accident or Misadventure	10	52.6	6.0
Respiratory disease	2	10.5	1.2
Tuberculosis ...	1	5.3	0.6
Congenital defect	1	5.3	0.6
Other causes ...	5	26.3	3.0
	19	100.0	11.4

Once again accidental deaths predominate in this age group accounting for more than half the deaths in the group. It is however pleasing to be able to record a fall of about 25% in accidental deaths compared with 1955.

Causes of death in all ages 0—16 years

<i>Cause</i>	<i>Number of deaths</i>	<i>Percentage of total deaths among children up to 16 years of age</i>
Prematurity ...	41	24.4 approx.
Respiratory disease	39	23.2
Congenital defect	25	14.9
Accident or Misadventure	19	11.3
Infection ...	16	9.4
Birth Injury ...	8	4.7
Atelectasis ...	6	3.5
Tuberculosis ...	1	1.5
All other causes...	13	8.8
	168	100

Last year attention was drawn to the fact that year by year since 1947, when statistics were first prepared, the number of infant and child deaths had fallen. Not only has that position been maintained but the reduction in 1956 was a substantial one, the number of such deaths being 168 compared with 199 in the previous year.

SANITARY CIRCUMSTANCES OF COUNTY

Housing

The most important aspect of this work, especially in the rural districts, has been the improvement of property by way of grant aid under the Housing Act, 1949.

Details for the whole county are as follows:—

<i>Boroughs and Urban Districts</i>		<i>Rural Districts</i>	
<i>No. of houses subject to application for grant</i>	<i>No. of houses subject to grant</i>	<i>No. of houses subject to application for grant</i>	<i>No. of houses subject to grant</i>
69	60	683	602

It will be seen therefore that grants were made in respect of 662 houses compared with a figure of 640 in 1955. Slum clearance has also been commenced.

Conversion of Pail Closets to Water Closets.

Some 847 pail and vault closets were converted to water closets during the year of which 767 were in rural districts.

This represents an increase of 247 over 1955.

Refuse Collection and Disposal

A weekly collection of refuse is maintained in the urban districts but in the rural districts the period between collections varies on the whole from one to three weeks. In the smaller villages in the Horncastle Rural District the frequency of collection is only quarterly.

The shortage of suitable covering material for refuse tips appears to be fairly general. Fortunately most tips are a considerable distance from centres of population so that few nuisances to householders arise.

Camping Sites and Moveable Dwellings

There are 355 licensed sites for moveable dwellings and the total number of such dwellings permitted on the sites is 9,015, which represents an increase over 1955. The majority are in the coastal areas and the high standards of hygiene which have been achieved are largely due to the co-operation of all concerned, the public health inspector, camp owner and caravan occupier, and the fullest use has been made of the various services provided by the local authorities.

The County Council's camp at Ingoldmells continued to operate in a satisfactory manner.

Factories

There are 1,642 factories on the registers of district councils. Of these 279 are without mechanical power and the officers of district councils are responsible for the enforcement of provisions relating to general cleanliness, over-crowding, temperature, ventilation, drainage of floors and sanitary accommodation. In the remaining 1,363 factories, mechanical power is used and district councils only enforce the provisions relating to adequate sanitary accommodation.

A total of 2,134 inspections of factories was made during the year, and the number of defects dealt with was 96.

Water Supplies

The year which has passed has marked the commencement of a new policy insofar as water supplies are concerned, by the issue of circular 52/56 by the Minister of Housing and Local Government. The circular requests all statutory water undertakers to proceed as a matter of urgency with the suitable regrouping of undertakings, in order to promote the most effective use of water resources and to provide a reliable and efficient service at an economic cost with adequate technical staff.

The policy had already received consideration in the north of the county and the Minister has issued a draft order relating to the formation of a joint all purpose water board, covering the areas now served by the Grimsby, Cleethorpes and District Joint Water Board, the North Lindsey Water Board and the Caistor Rural District Council. A public inquiry has been held, when the Order was strongly contested and the Minister has since stated that, whilst he is still of the opinion that the long term interests of the area as a whole would best be served by a single board, he will consider two all-purpose water boards to cover the whole area.

The Minister has also suggested that statutory water undertakings in Nottinghamshire which are covered by the Sherwood Area Water Authorities' Regional Advisory Committee and authorities mainly in West Lindsey including Gainsborough Urban District Council, Gainsborough and Welton Rural District Councils, together with Lincoln City Council, should combine to form a single water board. Preliminary discussions have taken place in connection with this matter.

In the eastern sector of the county the East Lindsey Advisory Water Committee has been actively engaged in seeking advice from a team of experts appointed by the British Waterworks Association on methods of improving the undertakings in the area. The grouping of undertakings broadly covering the Louth-Horncastle-Woodhall Spa areas and the Mablethorpe-Alford-Spilsby-Skegness areas has been recommended by the team and is receiving the consideration of the authorities concerned.

All of these proposals cover, very broadly, areas which are served by the same major sources of supply or which on the whole obtain water from the same gathering grounds.

Shortages in the Horncastle Urban District and in the parishes of West Ashby and Hemingby which are served by the Horncastle Water Company continued.

The following table indicates the schemes which have been dealt with for financial assistance under the Rural Water Supplies and Sewerage Acts 1944-1953 and shows the position relating to the stage of the work:—

<i>Rural District</i>	<i>Details of Scheme</i>	<i>Ministry Grant</i>	<i>County Council Grant</i>	<i>Stage of work</i>
Glanford Brigg ...	Extensions of main in parishes of Barnetby, Barrow on Humber, Scawby and Wrawby. Estimated cost—£4,400	£1,100 (lump sum)	£74 for 30 years.	Work deferred by Ministry.
Horncastle ... Louth ...	<div> <div> Rising main from Raithby ... to Stenigot, Stenigot ... reservoir gravity main to ... Horncastle R.D. boundary ... </div> <div> <i>Estimated cost—</i> £110,843. Louth R.D. £7,917 </div> </div>	£1,720 for 30 years. £160 for 30 years	£1,720 for 30 years. £160 for 30 years	Work nearing completion.
Horncastle ...	Trunk main from Louth R.D.C. boundary. Reservoirs at Winceby, Flint Hill and Mareham on the Hill Estimated cost £118,000	£3,310 for 30 years	£3,020 for 30 years	Work nearing completion
Isle of Axholme	Extensions (i) parish of Wroot Estimated cost—£1,220 (ii) West Hale, Epworth Estimated cost—£1,440	£275 lump sum £400 lump sum	£13 for 30 years £25 for 30 years	Work completed
Spilsby ...	Further development of Regional scheme based on Driby source by two stages <i>Estimated cost</i> (i) £55,000 (ii) £86,886	£860 for 30 years £1,570 for 30 years	£860 for 30 years £1,570 for 30 years	Work proceeding

Sewerage and Sewage Disposal

Progress in this field has been curtailed, in accordance with the general policy laid down in the Ministry of Housing and Local Government Circulars 10/56 and 11/56 which relate to the restriction of capital expenditure.

Schemes for the provision of sewerage and sewage disposal have on the whole been affected by the financial restriction to a much greater extent than those for water supplies.

The following table indicates the schemes which have been dealt with for financial assistance under the Rural Water Supplies and Sewerage Acts 1944-1953 and shows the position relating to the stage of the work—

<i>Rural District</i>	<i>Details of Scheme</i>	<i>Ministry Grant</i>	<i>County Council Grant</i>	<i>Stage of Work</i>
Gainsborough	Sturton by Stow and Stow Village Scheme Estimated cost—£43,585	£1,000 for 30 years	£14,100 (lump sum)	Work not yet commenced. Section of scheme to serve proposed school to be carried out as first stage.
Gainsborough	Gate Burton and Marton Estimated cost—£28,591	£550 for 30 years	£8,139 (lump sum)	Work not yet commenced
Glanford Brigg ...	Messingham and Bottesford Stage II Laying sewers—Estimated cost—£147,200	£2,500 for 30 years	£40,722 (lump sum)	Work nearing completion
Grimsby ...	Humberston—Laying sewers—£31,758	£432 for 30 years	£6,640 (lump sum)	Work complete
Isle of Axholme	Epworth and Belton Estimated cost—£107,953 Haxey Estimated cost—£19,920 West Butterwick Estimated cost—£12,160	£2,000 for 30 years £440 for 30 years £250 for 30 years	£29,067 (lump sum) £6,395 (lump sum) £3,633 (lump sum)	Schemes divided into 2 stages in order to provide for new houses, as soon as possible. Work deferred by Ministry.
Spilsby ...	Ingoldmells part scheme for parish (excluding east of Roman Bank) Estimated cost—£71,450	£1,800 for 30 years	£21,890 (lump sum)	Work deferred by Ministry.
Spilsby ...	Anderby Creek—scheme for village Estimated cost—£21,760	£300 for 30 years	£4,612 (lump sum)	Work deferred by Ministry.
Welton ...	Saxilby scheme for village Estimated cost—£69,800	£1,500 for 30 years	£23,000 (lump sum)	Work deferred by Ministry (Scheme divided into 2 stages).

INSPECTION AND SUPERVISION OF FOOD AND DRUGS

Sampling of Food and Drugs

The law relating to food and drugs has been subject to little alteration during the year. The new regulations are:—

The Milk and Dairies (Channel Islands and South Devon Milk) Regulations, 1956, which prescribe that milk sold under these designations should contain not less than 4.0 per cent of milk fat.

The Flour Composition Regulations, 1956, which prescribe that flour should contain certain minimum quantities of nutrients including iron, vitamin B and nicotinic acid.

The Food Standards (Curry Powder) (Amendment) Regulations, 1956, and the Food Standards (Tomato Ketchup) (Amendment) Regulations, 1956, which raise the tolerance of lead which may be present in curry powder and tomato ketchup to 20 and 50 parts per million in lieu of the former standard of 10 and 20 parts per million, respectively.

No legal standard relating to the meat content has yet been made for pork and beef sausages and deficiencies in accordance with the former standards of 65 and 50 per cent of meat respectively continue to occur. Samples of potted meat have been taken with a view to maintaining potted meat and meat paste as two separate commodities. The trade in general recognise that the former should not contain cereal filler although no legal standard exists, but the latter is governed by the Food Standards (Meat Paste) Order which does permit cereal filler, providing that the minimum meat content is not less than 55 per cent.

During the last quarter of the year a laboratory at the County Offices was equipped with a Gerber Centrifuge and associated apparatus for the testing of informal samples of milk. This has enabled follow-up samples from herds known to be giving milk naturally deficient in fat and non fatty solids to be kept under close observation and improvement effected. Additional routine samples of processed milk, including that supplied by contract to schools and county homes, have been examined.

The following table gives particulars of samples examined by the Public Analyst:—

	Number Analysed	Genuine	Adulterated or otherwise below standard
1. Milk	499	437	62
2. Processed Milk Products (including cream, butter and ice cream)	77	74	3
3. Edible Fats and Oil	38	38	—
4. Preserves	16	16	—
5. Tinned, Bottled and Dried Articles	34	34	—
6. Alcoholic Beverages	19	19	—
7. Non-Alcoholic Beverages	38	37	1
8. Sugar and Flour Confectionery	26	26	—
9. Meat and Fish Products (not included in 5)	72	54	18
10. Vinegars, Pickles, Sauces, Spices, Flavourings and Essences	51	51	—
11. Cereal Products	20	20	—
12. Medicines and Drugs	97	95	2
13. Miscellaneous	88	88	—
Total ...	1,080	994	86

Certain samples of milk were found to contain added water and legal proceedings were instituted, as indicated in the following table:—

Sample No.	Percentage of Added Water	Fine and Costs
A 3742	8	£10 fine and £1 1 0d. costs
A 3846	20	£50 fine and £1 8 0d. costs
A 3847	65	£75 fine and £1 8 0d. costs
B 3029	5	£5 fine and £5 0 0d. costs
B 3030	12	(same vendor)

In the other cases where samples failed to satisfy the prescribed tests, warnings were issued or advice was given. In addition four complaints of food not being of the substance demanded were investigated and warnings issued to the firms concerned. These included:—
Ball-pen in loaf of bread
Cockroach in biscuit
Pencil sharpener in one pint bottle of milk
Disinfectant in soft drink

Merchandise Marks Acts, 1887 to 1953

Inspections under the above Acts have been carried out in order to ensure the correct marking or labelling of imported food stuffs and informal action has been taken in numerous instances. The work is associated with duties under the Food and Drugs Act.

Specified Areas

The larger part of the County is now included in the two specified areas made by the Minister of Agriculture, Fisheries and Food. The Orders stipulate that all milk which is sold by retail, including sales in catering establishments, must be sterilised, pasteurised or tuberculin tested.

The areas in the county which are covered by these two orders are as follows:—
Cleethorpes and Scunthorpe Boroughs, Barton, Brigg, Market Rasen and Gainsborough Urban Districts, Caistor, Brigg, Grimsby, Gainsborough and Isle of Axholme Rural Districts.

These districts have a total population of 209,050 which is approximately two thirds of the population of the County. In addition, most of the milk sold in other non specified parts of the County is now designated.

Supervision of Pasteurising Plants

The six pasteurising plants under supervision by the County Council's officers, have functioned satisfactorily during the year, as indicated by the following table.

<i>Tuberculin tested milk (Pasteurised)</i>			<i>Pasteurised Milk</i>		
<i>Total No. of Samples</i>	<i>Samples failing to satisfy methylene blue reduction test</i>	<i>Samples failing to satisfy phosphatase test</i>	<i>Total No. of Samples</i>	<i>Samples failing to satisfy methylene blue reduction test</i>	<i>Samples failing to satisfy phosphatase test</i>
272	Nil	2	336	Nil	2

In addition to routine sampling, the sections of the plant which are important in order to ensure the correct heat treatment of the milk are subject to regular checking. The plants are also subject to periodic examination before use in order to ensure that the system of cleansing and sterilisation, after each day's use, is satisfactory.

Biological Examination of Milk

During the year 730 samples of raw milk were taken for biological examination. Eight samples showed positive evidence of tuberculosis and, as a result, eight cows, one from each herd, were slaughtered.

As two samples gave inconclusive results, the herds concerned were examined by the Divisional Veterinary Officer of the Ministry of Agriculture, Fisheries and Food but no conclusive evidence of infection by tubercle was obtained.

In all cases the milk was normally subject to pasteurisation except that which was consumed by the producer or his employees.

Of the above samples 36 showed positive evidence of Brucella Abortus. As the milk from six of the herds concerned was retailed in its raw state, quarter samples were taken and the producers advised accordingly.

Food Hygiene Regulations, 1955

Following the coming into operation of the Food Hygiene Regulations, arrangements were made for Mr. Morley Parry, Food Hygiene Advisory Officer of the Ministry of Health, to give a talk about them. The Chairman of the County Council's Health Committee presided over the meeting which was attended by medical officers of health and public health inspectors from all parts of the geographical county of Lincolnshire.

The departments of the County Council concerned with catering, especially the school meals department, have been actively engaged in considering measures necessary in order to bring food premises up to the standards prescribed by the regulations and considerable progress has been made.

Meat Inspection

The following table shows the amount of meat inspected for human consumption by the officers of district councils. This is almost 100 per cent of all animals slaughtered.

Carcases Inspected		No. affected with Tuberculosis			No. affected with Cysticec-osis	No. affected with conditions other than Tuberculosis and Cysticecosis		
Animal	Total number	Whole carcasses condemned	Parts of carcasses condemned	Total	Part carcasses or organs *	Whole carcasses condemned	Parts of carcasses condemned	Total
Cows	920	12	107	119	1	13	98	111
Other Bovines	14,442	44	988	1,032	57	28	2,829	2,857
Calves	430	—	2	2	—	14	27	41
Sheep & Lambs	35,736	—	—	—	—	106	580	686
Pigs	40,848	15	1,243	1,258	1	177	259	436
Horses	Nil	—	—	—	—	—	—	—

* No cases occurred where a complete carcase was found to be affected.

CARE OF MOTHERS AND YOUNG CHILDREN

Ante-Natal Care

Once again there was a fall in the number of attendances at ante-natal clinics. The number of expectant mothers who attended increased by 119 but this can be explained by the fact that many expectant mothers are attending merely to have blood specimens taken. Many of them make this one visit and never attend again.

During the year the clinics at Louth and Skegness were closed but a new clinic was opened at Mablethorpe.

A start was made in 1956 in giving ante-natal instruction to expectant mothers. A class was opened in Scunthorpe at which a physiotherapist gives instruction in ante-natal exercises and relaxation and a doctor gives talks and conducts group discussion on ante-natal care.

The following table gives details of attendances at ante-natal clinics:—

Attendances at ante-natal clinics, 1956

Clinic	No. of expectant mothers	No. of attendances	Sessions held	Average attendances
Brigg	12	44	23	2
Cleethorpes	210	232	51	5
Crowle	20	63	24	3
Haxey	29	95	23	4
Horncastle	12	52	28	2
Immingham	22	25	20	1
Lincoln	16	48	24	2
Mablethorpe	31	50	13	4
Market Rasen	36	79	24	3
Scunthorpe	83	113	51	2
Attendances for Ante-Natal Examination at Infant Welfare Centres	471	801	281	3
	33	110	—	—
Total ...	504	911	281	—

Maternity Outfits

There were 2,019 maternity outfits issued during the year to mothers having their baby at home.

Care of unmarried mothers

There was a considerable increase during the year in the number of unmarried mothers admitted to special homes catering for this type of case. Under this arrangement which the County Council have with the Lincoln Diocesan Association for Moral Welfare 46 cases were dealt with, compared with 21 during the previous year. The increase is considered to be due partly to increases in illegitimate births and partly to the fact that facilities offered by the Diocesan Association are now more widely known.

Child Welfare

Infant Welfare Centres

An additional infant welfare centre was opened during the year at Grainthorpe, bringing the total to 56. Although there was a fall in attendances of about 4,500, the centres continue to be well attended and, when one considers the fact that much of the county is sparsely populated and that many mothers have to travel long distances to reach a centre it is evident that the centres are popular and much appreciated.

The following table gives details of infant welfare clinics held during the year:—

Infants attending infant welfare centres during 1956

Centres	Under one year		Over one and under two years		Over two and under five years		Total		No. of sessions	Average Attendances per session
	No. Attended	No. of Attend-ances	No. Attended	No. of Attend-ances	No. Attended	No. of Attend-ances	No. Attended	No. of Attend-ances		
Alford	37	315	8	104	41	106	86	525	24	22
Ashby	313	3,550	153	529	299	508	765	4,587	103	45
Bardney	17	123	8	51	18	55	43	229	24	10
Barnetby	20	259	13	101	38	202	71	562	28	20
Barrow-upon-Humber ...	11	174	10	100	26	77	47	351	28	13
Barton-upon-Humber ...	79	1,351	38	456	38	144	155	1,951	51	38
Binbrook	32	377	28	120	33	73	93	570	51	11
Brigg	44	1,062	26	452	23	290	93	1,804	51	35
Broughton	32	487	17	157	17	92	66	736	24	31
Burton-upon-Stather ...	17	170	3	54	14	70	34	294	24	12
Caistor	15	147	10	49	21	55	46	251	24	10
Chapel St. Leonards ...	8	116	3	42	10	40	21	198	24	8
Cleethorpes	283	4,061	171	483	77	101	531	4,645	124	37
Conningsby	48	326	26	47	16	27	90	400	24	17
Crowle	43	426	21	88	31	105	95	619	24	26
East Halton	11	155	14	75	29	177	54	407	24	17
Epworth	27	224	20	78	29	94	76	396	22	18
Fiskerton	15	180	16	84	34	66	65	330	24	14
Friskney	21	199	13	114	30	94	64	407	22	18
Gainsborough Spital Terrace ...	120	1,000	61	193	93	200	274	1,393	78	18
Gainsborough Woods Terrace ...	83	1,138	42	301	86	329	211	1,768	47	38
Goxhill	16	206	8	95	22	100	46	401	24	17
Grainthorpe	6	130	15	71	14	42	35	243	24	10
Haxey	20	138	14	77	42	89	76	304	24	13
Hemswell R.A.F. ...	44	289	21	57	31	92	96	438	26	17
Holton-le-Clay	7	97	8	29	14	42	29	168	24	7
Horncastle	58	632	33	222	54	325	145	1,179	51	23
Immingham	45	401	14	174	29	161	88	736	21	35
Keadby	45	1,065	31	316	36	305	112	1,686	51	33
Keelby	14	187	4	65	26	171	44	423	23	18
Kirton-in-Lindsey ...	24	232	14	35	17	63	55	330	24	14
Kirton-in-Lindsey R.A.F.	24	138	10	37	22	84	56	259	24	11
Laceby	21	253	11	160	13	183	45	596	23	26
Lincoln	4	18	4	9	22	32	30	59	28	2
Louth	104	1,083	43	244	55	268	202	1,595	52	31
Mablethorpe	87	1,521	50	202	101	399	238	2,122	52	41
Manby	33	352	23	146	36	134	92	632	22	29
Market Rasen	54	580	28	101	38	191	120	872	28	31
Messingham	17	392	11	223	26	189	54	804	50	16
New Holland	10	307	16	181	36	170	62	658	23	28
North Kelsey	3	44	4	43	22	104	29	191	24	8
North Somercotes ...	10	254	22	180	33	151	65	585	27	22
Saxilby	14	107	13	48	19	48	46	203	24	9
Scunthorpe	268	3,718	149	641	259	963	676	5,322	118	45
Skegness	136	2,004	104	312	47	243	287	2,559	51	50
South Killingholme ...	22	177	9	74	23	141	54	392	24	16
Spilsby	40	385	18	91	41	255	99	731	51	14
Tetney	26	239	11	36	13	31	50	306	24	13
Ulceby	17	205	9	94	22	121	48	420	23	18
Wainfleet	41	521	30	170	84	397	155	1,088	24	45
Waltham New	43	406	21	108	27	123	91	637	22	29
Waltham Old	29	332	24	60	28	100	81	492	22	22
Welton, Lincoln ...	20	177	20	135	28	137	68	449	28	16
Winteringham	18	204	10	98	12	35	40	337	24	14
Winterton	18	146	11	82	28	95	57	323	22	15
Woodhall Spa	13	139	16	64	13	37	42	240	23	11
Total ...	2,627	32,919	1,530	8,358	2,336	8,926	6,493	50,203	1,970	25

Toddlers' Clinics

Special toddlers' clinics continue to be held at each of the County Council's main clinics and parents of children aged two to five years are invited to bring these children by appointment for a complete overhaul. During the year 1,891 children were examined at 267 toddlers' sessions. The fact that 266 children were found to need treatment indicates the importance of these periodic examinations during the early years of a child's life and yet only comparative few mothers can be persuaded to bring their children to the toddlers' clinics.

The following table gives details of defects found at the toddlers' sessions held during 1956:—

Teeth	91	Lungs	10
Skin	15	Development	a. Hernia 3
Eyes			b. Other 3
a. Vision	1	Orthopaedic	a. Posture —
b. Squint	13		b. Flat foot 15
c. Other	6	Psychological	c. Other 24
Ears			a. Development —
a. Hearing	3		b. Stability 1
b. Otitis Media Rt.	3	Other Defects and Diseases...	41
Otitis Media Lt.	4		
c. Other	2		
Nose or Throat	17		
Speech	7		
Cervical Glands	1		
Heart and Circulation	6		
Total 266			

Care of Premature Infants

The County Council's arrangements for the care of premature infants have continued. Those who are born at home are given special nursing care by the County Council's nurse-midwives and when nursing is no longer required the Health Visitor takes over. Those premature infants who are born in hospital or maternity homes are given particular attention by Health Visitors on discharge. Special equipment such as premature baby cots are provided by the County Council where necessary. The number of premature live babies born in 1956 was 334, a decrease of 34 compared with the previous year. There were 74 premature still births compared with 67 in the previous year. The following table gives detailed information regarding premature births:—

Weight at Birth	Premature live births															Premature still births		
	Born in Hospital *			Born at home and nursed entirely at home			Born at home and transferred to hospital on or before 28th day			Born in nursing home and nursed entirely there			Born in nursing home and transferred to hospital on or before 28th day			Born in hospital (17)	Born at home (18)	Born in nursing home (19)
	T'tl (2)	Died within 24 hrs. of birth (3)	Survived 28 days (4)	T'tl (5)	Died within 24 hrs. of birth (6)	Survived 28 days (7)	T'tl (8)	Died within 24 hrs. of birth (9)	Survived 28 days (10)	T'tl (11)	Died within 24 hrs. of birth (12)	Survived 28 days (13)	T'tl (14)	Died within 24 hrs. of birth (15)	Survived 28 days (16)			
(a) 3 lb. 4 oz. or less (1,500 gms. or less)	27	10	9	2	2	—	5	1	1	—	—	—	—	—	—	22	2	—
(b) Over 3 lb. 4 oz. up to and including 4 lb. 6 oz. (1,500-2,000 gms.) ...	54	6	43	5	—	5	7	—	5	—	—	—	—	—	—	21	3	—
(c) Over 4 lb. 6 oz. up to and including 4 lb. 15 oz. (2,000-2,250 gms.)	63	2	56	6	—	6	4	—	3	1	—	1	—	—	—	10	3	—
(d) Over 4 lb. 15 oz. up to and including 5 lb. 8 oz. (2,250-2,500 gms.) ...	105	1	101	43	—	43	10	1	9	2	—	2	—	—	—	5	8	—
Totals ...	249	19	209	56	2	54	26	2	18	3	—	3	—	—	—	58	16	—

* The group under this heading includes any cases born in one hospital and transferred to another.

Day Nursery Accommodation

There was in 1956 only one day nursery administered by the County Council still open and the average daily attendance during the year was 14. Nearly half of the children attending the nursery did not come within the classification of priority, there being no need to limit admissions to priority cases in view of small numbers attending.

Welfare Foods

The arrangements for the distribution of welfare foods were extended during the year by the opening of two additional distribution centres. There were at the end of the year 150 centres from which during this year 182,488 tins of national dried milk, 31,246 bottles of cod liver oil, 13,669 packets of vitamin A and D tablets and 195,509 bottles of orange juice were distributed. The following table gives details of the average weekly issues year by year since the County Council assumed responsibility for distribution in 1954. From these figures it will be seen that the decline in the take-up of national dried milk has continued but that there has been a further substantial increase in the issue of orange juice.

Average Weekly Issues of Welfare Foods

Period	National Dried Milk	Cod Liver Oil	Vitamin Tablets	Orange Juice
27 week period ended 31/12/54	4,012	614	195	2,885
1955	3,647	636	243	3,417
1956	3,509	601	263	3,759

Dental Care

The year under review shows a slight improvement on the previous year as regards staffing, but no extension of the areas covered by the staff. Treatment is still not available under the Maternity and Child Welfare scheme in the Brigg, Barton-upon-Humber, Crowle, Epworth, Immingham, Caistor and Gainsborough areas, though it is provided where the patient is willing to undertake the travelling necessary to attend a distant clinic where there is a dental officer.

There has been an increase in the number of mothers applying for treatment. These are referred by general practitioners occasionally, but mostly by doctors on the staff of the health department or health visitors. Those from the general practitioners are predominantly ante-natal cases whilst those from our own staff are now almost entirely nursing mothers attending the infant welfare clinic. The relationship between the number of mothers or children attending maternity and child welfare clinics and attending for dental treatment varies greatly from one clinic to another, as can be seen from the following table:—

Patients attending Clinics

Clinic	Maternity and Child Welfare Clinic		Maternity and Child Welfare Dental Clinic	
	Mothers for Ante-natal care	Children	Mothers	Children
Ashby	—	765	19*	7*
Cleethorpes	210	531	32	61
Horncastle	12	145	} 35	32
Spilsby	2	99		
Market Rasen	36	120	46	45
Louth	—	202	1	9
Scunthorpe (P.A.)	83	676	25	20
Skegness	—	287	2	4

* This work was done in the mobile dental clinic.

These dental clinics wherever possible are run in conjunction with the maternity and child welfare clinic in order to save unnecessary travelling for the patients. Rarely, however are there enough maternity and child welfare patients to fill all the appointments at these dental sessions. The sessions are therefore mixed sessions of maternity and child welfare and school patients. By dividing these sessions up in proportion to the attendances of each class of patient, the time devoted to maternity and child welfare work can be assessed. It is getting less each year and now represents only a part of one session a week for each officer.

The following statistical analysis is given each year as a simple indication of the effectiveness of the work being done, the aim being to increase the number of teeth saved and reduce the number of teeth extracted and of consequential artificial replacements.

Year	1950	1951	1952	1953	1954	1955	1956
Extractions per patient ...	6.73	3.40	2.86	1.54	4.57	2.04	3.74
Fillings per patient ...	.53	1.09	1.16	1.52	.90	1.30	1.20
Dentures per patient ...	.69	.96	.41	.47	.53	.90	.73
Ratio of partial to full dentures	.133	1.65	2.07	2.75	1.14	1.25	1.00

It will be seen from these figures that the proportion is tending to deteriorate but in view of the small number of patients involved this is of no great significance. Each year 5,000 mothers and 5,000 children become eligible for treatment. The former remain so for about 20 months and the latter for 5 years when they come under the school dental service. The proportion of these who apply for treatment under the maternity and child welfare dental scheme is almost negligible.

Of those inspected 7 mothers and 28 children did not require treatment. The majority of patients applying for treatment do so because of pain or very obvious dental defects. It is encouraging to be able to record however that in respect of dental treatment provided for children three teeth were filled or otherwise treated for conservation for each tooth extracted.

The majority of mothers seen by Mr. Hollier at the Scunthorpe Parkinson Avenue Clinic were referred to Mrs. Opie, the Oral Hygienist. Treatment was given to 17, all of whom were given instruction in oral hygiene. Scalings, polishings, gum treatments, etc., added up to 121.

A portable X-Ray Unit is available when required and film processing is done in the dark-room at the County Offices. The County Council's dental laboratory remained closed during the year but the equipment was moved to new premises in Lindum Road for reopening on 1st January, 1957, in connection with the new orthodontic scheme. Work has been sent out to dental laboratories outside the county.

The following tables give information regarding the number of patients provided with treatment and the form of treatment provided:—

(a) *Numbers provided with dental care*

	New patients examined	New patients needing treatment	New patients treated	Number made dentally fit	Appointments	Attendances
Expectant and nursing mothers	160	153	134	135	595	517
Children under five	178	150	147	112	186	204

(b) *Form of treatment provided*

	Expectant and nursing mothers	Children under five
Extractions under—local anaesthetic ...	163	20
—general anaesthetic ...	256	48
Administrations of—local anaesthetic ...	78	15
—general anaesthetic ...	42	32
Fillings ...	160	91
Scalings and or gum treatment ...	64	13
Silver nitrate treatment ...	24	104
Other operations, dressings, etc. ...	218	23
Radiographs ...	6	—
Dentures —complete ...	41	—
—partial ...	41	—
—repairs ...	3	—
Crowns ...	—	—
Inlays ...	—	—

MIDWIFERY AND HOME NURSING

The Midwifery and home nursing services in this county are in the main operated jointly by nurses qualified in and undertaking both midwifery and home nursing. At the end of the year the staff consisted of a superintendent nursing officer, two assistant nursing officers, one superintendent in charge (under the Superintendent nursing officer) of the services in Scunthorpe, 67 nurse/midwives, 8 midwives and eighteen district nurses.

Difficulty is still being experienced in filling staff vacancies. Almost invariably the only applications received for nursing posts are from nurses who have some ties with the county.

In pursuance of the County Council's policy, four nurses and sixteen midwives attended refresher courses during the year.

On 12th September, an invitation was extended to midwives and health visitors to attend a One Day Course on the education and care of women in childbirth by Dr. Grantly Dick Read. This course was provided by the Central Council for Health Education. Over half the midwives in the County were able to attend while the remainder had the opportunity to go to Grimsby when Dr. Grantly Dick Read gave a similar course there at a later date.

I have little doubt that to those women who have had children, childbirth is the most important event which has taken place in their lives. It seems, therefore, that no efforts should be spared in endeavouring to ensure that the whole process is looked upon by expectant mothers with confidence. Furthermore if expectant mothers are able to understand the actual mechanism of childbirth I have little doubt that pain can be almost eliminated with nearly all normal births.

Dr. Read gave three lectures and showed some interesting films. He talked in a way in which he could be easily understood and undoubtedly those midwives who heard him will be able to bring benefit to many women they attend in the future.

In a large and sparsely populated county such as Lindsey it is easy for the nurse or midwife to feel isolated and out of touch. To counteract this, regular visits are paid to all members of the staff by the superintendent nursing officer or the assistants and from time to time group meetings of which there were 14 in 1956 are arranged to discuss matters of interest affecting the nurse and her work.

During the year the superintendent nursing officer and the two assistants paid the following visits:—

To midwives and nurses employed by the County Council	...	...	...	...	404
To midwives in private practice	...	...	...	...	16
To maternity homes and hospitals	...	...	...	...	16
To nursing homes	...	...	...	...	29

Midwifery

The duties placed upon the County Council by the Midwives Act, 1951, are carried out by the superintendent nursing officer and her two assistants. The following table gives the number of midwives in practice in the county at the end of the year:—

Number of deliveries attended by Midwives in the Area during 1956.

	Deliveries attended						
	No.	Doctor not booked		Doctor booked			Cases in Institutions
		Doctor present	Doctor not present	Doctor present	Doctor not present	Totals	
Midwives employed by local ... health authority ...	75	22	64	494	1,245	1,825	—
Midwives employed by hospital management committees ...	52	—	—	—	—	—	3,069
Midwives in private practice ...	9	1	16	10	31	31	—
Totals ...	136	23	80	504	1,249	1,856	3,069

In addition to the cases shown in the foregoing table, the County Council's midwives attended 1,594 mothers in their own homes who had been confined in hospital but discharged before the fourteenth day, an increase of 306 over the figures for last year.

The number of home visits made by the County Council's Midwives to women in the ante-natal period was 15,603 and in the lying-in period 40,144.

The proportion of expectant mothers who had their confinement at home during the year was 37%, the same percentage as during the previous year.

In 73% of the home confinements gas and air analgesia was administered.

Home Nursing

The demand on the home nursing service, measured in terms of cases dealt with by the County Council's nurses, again shows a decrease but the number of visits paid by nurses has slightly increased.

The increase in visits is probably accounted for by the increase in the number of visits to patients over 65 years of age who have received an average of 39 visits per patient compared with 25 per patient for all types of cases.

The following table gives details of the demand on the service year by year since 1949:—

Home Nursing 1949—1956

	1949	1950	1951	1952	1953	1954	1955	1956
County population	299,040	308,600	309,800	310,900	312,300	313,500	316,200	316,800
Nurses employed (whole-time equivalent)	46	47	48	49	51	51	49	49
Cases attended	7,204	7,208	7,867	8,256	8,697	8,502	8,001	7,557
Average case per nurse *	157	153	163	168	170	167	163	154
Visits paid	167,290	156,719	164,278	182,703	191,257	201,442	185,528	187,861
Average visits per nurse	3,637	3,334	3,423	3,729	3,730	3,950	3,786	3,834
Average visits per patient	23	21	20	22	22	24	23	25

HEALTH VISITING

There were forty four health visitors on the County Council's staff at the end of the year. Although the service provided during the year was satisfactory and all demands were met, there is little hope of the more important part of the health visitor's work being developed unless it is found possible to recruit up to the establishment of 55 approved by the Minister of Health or to relieve health visitors of tasks which can be carried out equally well by auxiliary helpers. Unless energetic and realistic steps are taken to attract to the profession each year a considerable number of new recruits, there is little or no hope of the number of health visitors in the county being increased to the figure of 55. Indeed the county will be fortunate if the present strength can be maintained. It is important therefore that attention should be given to the possibility of appointing auxiliary helpers to carry out duties which do not call for the training, skill and experience of a health visitor.

The health visitor is being called upon to enlarge the scope of her duties in many ways. For example, problem families are being given particular attention necessitating frequent visits by health visitors. The problem of old age has had its effect on the work of the health visitor who has had to give a great deal of time to dealing with the many problems which old age creates. The developing of health education inevitably involves a considerable extension of the health visitor's work. If she is to have the time to concentrate on these and other important aspects of her work some of the duties at present undertaken by her in connection with school medical inspections, school cleanliness inspections, vaccinations and immunisations at child welfare clinics must be transferred to other staff.

The County Council have a scheme for training health visitors but it was not possible to secure any trainees during the year.

The County Council arrange for their health visitors to attend refresher courses about once every five years and last year five health visitors attended these courses.

The work which the health visitors carried out during the year is summarised as follows:—

Sessions attended:—

School Clinics	860
Ante-Natal Clinics	281
Infant Welfare Centres	1,970
Immunisation Clinics	205
Hospital Board Clinics	731
School Medical inspections	1,137
Toddlers' Clinics	267

Home visits to:—

School children	5,106
Expectant mothers	1,623
Infants under 1 year	33,742
Infants aged 1-5 years	52,072
Mental defectives	2,724
Tuberculous patients	3,511
Psychiatric patients	183
Old people	1,640
Patients discharged from hospital	319
Others	3,520

Examination of school children (cleanliness) 82,840

IMMUNISATION AND VACCINATION

Vaccination against Smallpox

Vaccination against smallpox continues to be undertaken both by general practitioners and by doctors employed by the County Council. There were 1,716 primary vaccinations carried out during the year compared with 1,538 for the previous year. Whilst it is gratifying to be able again to record an increase the number vaccinated is still far too low. The number re-vaccinated during the year was 281 compared with 224 for the previous year. In the following table the numbers of vaccinations and re-vaccinations are classified according to age groups and according to the county district in which they were carried out.

Vaccination and Re-Vaccination carried out during 1956

District	Primary vaccinations					Re-vaccinations				
	Age at date of vaccination					Age at date of vaccination				
	Under 1	1-5	5-15	15 or over	Total	Under 1	1-5	5-15	15 or over	Total
Urban										
Alford	14	3	—	1	18	—	—	—	1	1
Barton-on-Humber	20	4	1	5	30	—	—	—	3	3
Brigg	18	3	—	6	27	—	—	—	7	7
Cleethorpes Borough	78	19	8	23	128	—	1	1	33	35
Gainsborough ...	113	17	10	39	179	—	2	2	16	20
Horncastle ...	16	8	10	2	36	—	1	2	4	7
Louth Borough	52	7	6	9	74	—	1	—	7	8
Mablethorpe and Sutton	46	5	2	5	58	—	—	1	—	1
Market Rasen ...	16	1	—	2	19	—	—	—	—	—
Scunthorpe Borough	160	15	6	17	198	—	4	2	24	30
Skegness	77	21	8	14	120	—	2	3	29	34
Woodhall Spa ...	19	—	—	1	20	—	—	3	2	5
Rural										
Caistor	66	7	3	10	86	—	—	1	11	12
Gainsborough ...	48	3	6	8	65	—	—	—	4	4
Glanford Brigg ...	98	9	13	12	132	—	1	6	20	27
Grimsby	62	6	4	16	88	—	3	5	19	27
Horncastle ...	59	9	1	6	75	—	2	11	7	20
Isle-of-Axholme ...	22	3	—	1	26	—	—	—	—	—
Louth	69	2	2	7	80	—	—	6	12	18
Spilsby	101	19	—	16	136	—	—	4	10	14
Welton	71	35	5	10	121	—	2	5	11	18
Total ...	1,225	196	85	210	1,716	—	19	52	220	291

Immunisation against Diphtheria and Whooping Cough

The number of children immunised against diphtheria during the year was 4,354. This is 167 more than the previous year and is the highest figure recorded since 1949. The following table gives information relating to children immunised against diphtheria during 1956:—

Diphtheria immunisations carried out during year ended 31.12.56

District	Primary injections		Reinforcing injections
	under five years of age	between 5 and 14 years of age	
Urban			
Alford	—	1	29
Barton-upon-Humber ...	17	10	84
Brigg	14	13	54
Cleethorpes Borough ...	63	73	408
Gainsborough	23	32	260
Horncastle	2	10	42
Louth Borough	9	23	220
Mablethorpe and Sutton ...	2	27	84
Market Rasen	6	5	40
Scunthorpe Borough ...	55	115	1,161
Skegness	25	66	137
Woodhall Spa	—	2	27
Rural			
Caistor	24	53	210
Glanford Brigg	37	95	344
Gainsborough	13	25	112
Grimsby	31	35	175
Horncastle	7	8	122
Isle of Axholme	5	4	72
Louth	10	72	279
Spilsby	40	100	258
Welton	26	13	179
Total ...	409	782	4,297

The County Council, in 1954, adopted a scheme for giving protection against diphtheria and whooping cough by the use of a combined vaccine. In 1956, 3,163 children were so immunised, an increase of 465 over the figure for the previous year and details are given in the following table:—

Combined Whooping Cough and Diphtheria Immunisation carried out during year ended 31.12.56

District	Age at date of immunisation					
	Under One	One	Two	Three	Four	Total
Urban						
Alford	18	5	—	1	—	24
Barton-upon-Humber ...	65	12	2	—	1	80
Brigg	35	8	4	1	—	48
Cleethorpes Borough ...	131	83	9	2	3	228
Gainsborough	184	47	10	3	8	252
Horncastle	32	9	1	1	—	43
Louth Borough	86	37	2	5	1	131
Mablethorpe and Sutton	39	12	3	3	3	60
Market Rasen	18	7	6	1	1	33
Scunthorpe Borough ...	305	157	30	12	8	512
Skegness	89	56	18	10	7	180
Woodhall Spa	16	6	—	1	—	23
Rural						
Caistor	88	22	7	3	1	121
Glanford Brigg	220	62	14	4	4	304
Gainsborough	68	29	2	1	1	101
Grimsby	105	62	9	5	4	185
Horncastle	72	31	4	1	—	108
Isle of Axholme	69	18	8	3	4	102
Louth	109	49	11	6	5	180
Spilsby	174	72	17	6	3	272
Welton	117	46	9	2	2	176
Total	2,040	830	166	71	56	3,163

The following table gives particulars of children who at any time between 1st January, 1942 and 31st December, 1956, had completed a course of immunisation against diphtheria.

Number of children at 31st December, 1956, who had completed a course of immunisation at any time since 1st January, 1942

Age at 31st Dec., 1956	Under 1	1—4	5—9	10—14	
Born in year	1956	1955—1952	1951—1947	1946—1942	Total under 15
Number immunised	534	11,916	20,011	17,209	49,670
Estimated mid-year child population, 1955	Children under 1 5,140	Children 1—4 20,560	Children 5—14 51,400		77,100

The following table gives details of children immunised against whooping cough during the year by the use of a separate whooping cough vaccine. It will be seen that only 101 children were so immunised but it must be remembered that immunisation against whooping cough can be given in combination with immunisation against diphtheria and the majority of parents prefer this method.

Whooping Cough immunisation 1956

District	Age at date of immunisation					
	Under One	One	Two	Three	Four	Total
Urban						
Alford	1	—	—	—	—	1
Barton-upon-Humber ...	—	1	—	1	—	2
Brigg	—	—	—	—	—	—
Cleethorpes Borough ...	—	—	2	1	—	3
Gainsborough	—	—	1	—	—	1
Horncastle	—	—	1	—	1	2
Louth Borough	—	—	—	—	1	1
Mablethorpe and Sutton	—	—	—	—	—	—
Market Rasen	—	—	—	—	—	—
Scunthorpe Borough ...	1	2	1	4	1	9
Skegness	—	—	—	2	—	2
Woodhall Spa	—	—	—	—	—	—
Rural						
Caistor	14	2	1	4	1	22
Gainsborough	—	—	—	1	—	1
Glanford Brigg	5	1	2	1	—	9
Grimsby	—	—	1	2	1	4
Horncastle	1	1	—	2	1	5
Isle of Axholme	—	—	1	1	—	2
Louth	1	—	—	1	—	2
Spilsby	9	10	1	5	2	27
Welton	2	2	1	1	2	8
Total	34	19	12	26	10	101

Vaccination against Tuberculosis

The County Council have not so far adopted a scheme for giving B.C.G. vaccination to children nearing school leaving age but proposals were under consideration at the end of the year. The only scheme in operation is that administered by the chest physicians and this is limited to children who are contacts of cases of tuberculosis and to cases of babies born to tuberculous parents although the disease is arrested or cured.

The number of vaccinations performed during the year was 114 compared with 305 during the previous year. when because of the discovery of several new cases of tuberculosis in a rural area of the county, the children attending schools in that area were offered B.C.G. vaccination.

Vaccination against Poliomyelitis

The year was marked by the introduction of a scheme for vaccination against poliomyelitis.

The Minister of Health at the beginning of the year selected as the first age group for registration for vaccination children born in the years 1947 to 1954 inclusive. Parents of all children in Lindsey in this age group were informed of the scheme either through the health visitors or through the schoolteachers. Bearing in mind that the scheme was a new one and introduced quite suddenly the response in this county was very good. Out of a total of approximately 40,000 children in the age group, 17,184 were registered for vaccination.

As supplies of vaccine were limited, the Minister decided that vaccination could only be offered to registered children who were born in the months of March and October in the years 1951 to 1954, August and November in the years 1947 to 1954, with a reserve comprising registered children born in May in the years 1947 to 1954.

At the end of the year 1,885 children had received both injections and 86 had received the first injection.

AMBULANCE SERVICE

The Ambulance Service in Lindsey continues to be operated jointly with the fire service, most of the personnel undertaking both fire fighting and ambulance service duties.

Two new ambulances were introduced into the fleet during the year to replace a similar number of vehicles no longer considered efficient for the work they have to do.

The following table gives details of the mileage travelled in 1956 by the County Council vehicles, by the hospital car service and by vehicles of other authorities on behalf of the County Council:—

	5th July to 31st Dec., 1948	1949	1950	1951	1952	1953	1954	1955	1956
Ambulances: Mileage	157,117	682,588	709,849	560,846	641,641	656,836	685,228	733,800	727,529
Hospital Car Service: Mileage ...	85,833	221,049	339,511	511,923	426,735	499,199	532,826	443,697	400,701
Other Authorities: Mileage ...	4,757	21,333	43,382	43,666	48,000	46,699	50,661	48,227	46,754
Total Mileage ...	247,707	924,970	1,092,742	1,116,435	1,116,376	1,202,734	1,268,715	1,225,724	1,174,984

Again it is possible to record a decrease in mileage compared with the previous year.

It will be seen that the total mileage travelled by the County Council's own vehicles, including the two sitting case vehicles which were introduced into the fleet in 1955, decreased by about 6,000 miles and that there was a further decrease in the Hospital Car Service mileage of about 43,000 miles.

Details of the cases dealt with by the County Council Ambulance Service during the year ended 31st December, 1956

Stations	Cases for admission to hospital			Cases for Out-patient treatment			Cases discharged and transferred from hospital or institution			Totals		
	Stretcher cases (1)	Sitting cases (2)	Total mileage (3)	Stretcher cases (4)	Sitting cases (5)	Total mileage (6)	Stretcher cases (7)	Sitting cases (8)	Total mileage (9)	Stretcher cases (10)	Sitting cases ... (11)	Total mileage (12)
Louth	729	280	19,313	226	12,098	102,854	129	582	17,386	1,084	12,960	139,553
Cleethorpes	1,255	396	21,127	849	8,355	63,756	276	783	11,062	2,380	9,534	95,945
Gainsborough	655	246	18,128	660	7,036	56,512	259	492	10,845	1,574	7,774	85,485
Scunthorpe	1,814	869	28,635	3,378	23,407	113,632	523	1,715	16,547	5,715	25,991	158,814
Skegness	660	364	24,996	228	5,981	62,959	175	587	19,301	1,063	6,932	107,256
Barton-upon Humber	242	79	8,258	472	2,368	20,220	70	146	2,657	784	2,593	31,135
Horncastle	130	219	12,043	24	1,959	17,450	19	129	4,125	173	2,307	33,618
Mablethorpe	151	204	9,703	18	4,569	29,011	9	172	3,478	178	4,945	42,192
Market Rasen	272	45	11,145	81	1,461	19,264	33	95	3,122	386	1,601	33,531
Totals	5,908	2,702	153,348	5,936	67,234	485,658	1,493	4,701	88,523	13,337	74,637	727,529

Number of accident and emergency cases included in columns (10) and (11) ... 2,295

The following table gives details of cases conveyed by rail during 1956 and for purposes of comparison during 1954 and 1955. Efforts have been continued to send as many long distance cases as possible by rail but although there has been an increase in cases dealt with in this way the result is not too satisfying. The simple fact of the matter is however that Lindsey is not too well served by railway services and consequently many long distance cases still have to go by road because of the inconvenience of a rail journey.

	Stretcher cases	Sitting cases	Rail miles	Mileage travelled by County Council ambulances and Hospital Car Service vehicles in conveying patients to and from stations
Year ended 31st December, 1956 ...	54	542	50,709	4,909
Year ended 31st December, 1955 ...	60	394	42,345	4,767
Year ended 31st December, 1954 ...	54	365	42,837	4,768

The County Council have continued to use the hospital car service for the conveyance of a considerable number of sitting cases and the arrangement with the Lincoln County Borough Council whereby the latter authority covers an area of Lindsey in the north of Lincoln containing approximately 97,299 acres with a population of about 18,250 and with the Holland County Council under which that authority covers an area in Lindsey to the north of Boston containing 26,000 acres and a population of 3,500 have also continued throughout the year. Details of cases dealt with by these two authorities and by the hospital car service are given in the following table:—

Cases dealt with under arrangements with other authorities and by the Hospital Car Service

	Stretcher cases			Sitting cases			Total number of cases (7)	Total number of journeys (8)	Total mileage (9)
	No. of cases (1)	No. of journeys (2)	mileage (3)	No. of cases (4)	No. of journeys (5)	mileage (6)			
1. Lincoln County Borough Council ...	1,587	676	18,682	2,217	916	25,650	3,804	1,592	44,332
2. Holland County Council ...	41	40	904	126	69	1,518	167	109	2,422
3. Hospital Car Service ...	...	...	...	23,713	8,691	400,701	23,713	8,691	400,701
Totals ...	1,628	716	19,586	26,056	9,676	427,869	27,684	10,392	447,455

Number of accident and emergency journeys included in column (8) ... 92

Personnel and Vehicles

The following table gives details by stations of the number of personnel employed and the number of vehicles in use at the end of the year, compared with the establishment fixed by the County Council. The third main column relates only to paid female attendants. In addition the County Council use as female attendants persons who are prepared to act in this capacity without pay, receiving only subsistence and travelling expenses.

Station	Whole-time Men		Retained Men		Female Attendants		Ambulances	
	Establishment	Number employed	Establishment	Number available	Establishment	Number enrolled	Establishment	Avail'ble for use
Louth ...	9	9	15	14	7	5	5 plus 2 Sitting Case Cars plus 2 spares	5 plus 2 Sitting case cars plus 2 spares
Cleethorpes ...	9	9	12	9	7	3	5	5
Gainsborough ...	6	6	12	12	7	3	4	4
Scunthorpe... ..	14	13	9	9	7	3	9	9
Skegness ...	6	6	12	12	7	4	4	4
Barton-upon-Humber	2	2	12	12	3	1	1	1
Horncastle ...	2	2	12	12	3	3	1	1
Mablethorpe ...	2	2	12	10	3	1	1	1
Market Rasen ...	2	2	12	12	3	3	1	1
Totals ...	52	51	108	102	47	26	31 plus 2 Sitting Case Cars plus 2 Spares	31 plus 2 Sitting case cars plus 2 spares

Number of vehicles off the road for repair or overhaul at 31st December, 1956 ... Nil
Number of vehicles awaiting disposal ... 2

Training of Personnel in First Aid

The following statement indicates the position at 31st December, 1956, regarding the qualifications of personnel to administer first aid treatment.

<i>Whole-time Personnel</i>				
Untrained but receiving training	...	...	...	3
Trained to CERTIFICATE standard	...	...	...	3
Trained to VOUCHER standard	...	...	...	3
Trained to MEDALLION standard	...	...	...	42
<i>Retained Personnel</i>				
Untrained but receiving training	...	...	...	11
Trained to CERTIFICATE standard	...	...	...	5
Trained to VOUCHER standard	...	...	...	7
Trained to MEDALLION standard	...	...	...	79
<i>Female Attendants</i>				
Nursing experience	...	...	...	17
First Aid qualifications	...	...	...	9
Untrained	...	...	...	—

PREVENTION OF ILLNESS, CARE AND AFTER-CARE

General

Two developments of the County Council's scheme for the prevention of illness, care and after-care were introduced during the year. Arrangements were made for dealing with problem families and a sitting-in service for old people was brought into operation.

Tuberculosis

The environmental circumstances of each newly notified case of tuberculosis are investigated by the health visitors and reports are forwarded to the local chest physicians. The health visitors assist in arranging for the patients and contacts to attend the nearest chest clinic. All cases of tuberculosis are visited periodically and any adverse changes in the home circumstances notified to the chest physician. Unsatisfactory housing and sanitary conditions are also reported to the District Council concerned. Chest physicians make recommendations to the local health authority in connection with the provision of rehabilitation, open-air shelters, extra nourishment and other matters in which they think the authority may be able to help.

Three open-air shelters were in use at the end of the year, the same number as for the previous year.

Seven tuberculous patients were issued with bedsteads and bedding during the year.

The County Council have a scheme for the admission of patients to the Papworth Village Settlement but at the end of the year no Lindsey patients were being maintained there.

The arrangements which the County Council made some time ago for the medical or X-ray examination of staff whose duties bring them into close contact with children continued during 1956. The number of staff X-rayed under these arrangements during the year was 131 and the number examined without X-ray was 295. All members of such staff are encouraged to undergo X-ray examination through the mass radiography unit as and when they have the opportunity.

During the year arrangements were made for 746 persons who had been in contact with cases of tuberculosis to be examined giving a ratio of 3.52 for each new case of tuberculosis reported.

The County Council provided during the year extra nourishment, consisting of milk and eggs, in 52 cases where such provision was recommended by the chest physician and where the financial circumstances of the recipients were such that they could not afford to purchase it themselves.

Dr. J. Bauer, Medical Director of the Lincolnshire Mass Radiography Unit, has forwarded the following details relating to the work of the Unit in Lindsey during the year:—

	Males	Females	Total
Miniatures taken	3,610	3,571	7,181
Recalled for large films	71	73	144
Recalled for clinical examination	35	34	69
Referred to Chest Clinic	14	13	27
Referred to own doctor	5	5	10
Cases of bronchiectasis	—	3	3
Cases of pneumokoniosis	—	—	—
Cases of neoplasm	3	3	6
Cases of cardiac abnormality	8	7	15
Cases of post primary active pulmonary tuberculosis	6	2	8
Cases of post primary inactive pulmonary tuberculosis	8	3	11

Loan of equipment

Equipment required in the routine nursing of patients is held by the district nurses and supplied on loan as required. Other articles of equipment requested by the doctors or nurses have been supplied direct from the County Health Department as follows:—

<i>Equipment</i>	<i>No. of patients supplied</i>
Wheel chairs ...	65
Dunlopillo mattresses ...	52
Spinal carriages ...	5
Bedsteads ...	13
Crutches ...	14
Commodes ...	5
Self-lifting poles ...	5
Fracture boards ...	5
Premature Baby Cots ...	4
Bedding ...	1
Special walking aids ...	2

Convalescence

The number of patients admitted under the Council's scheme to convalescent homes for a recuperative holiday was 21, compared with 19 in 1955. The average stay of the patients admitted in 1956 was 2.75 weeks.

Problem Families

A scheme for dealing with problem families in Lindsey came into operation in August, 1956.

The health visitors have been designated as the caseworkers with the responsibility of taking charge of the problem families in their area, exercising close supervision, ensuring that these families know how to make full use of the various services available to them and, by sympathy and understanding, helping them to achieve a better standard of life.

Selected domestic helpers can be sent into households where there is a need for someone to help the mother with the housework and to show her by practical demonstration how to do the work herself. Domestic help so provided is free of charge except insofar as householders offer to make some payment for the service provided.

Where there is found to be a need for cooking utensils, children's bedding and clothing etc., and where the need cannot be met by the parents, the National Assistance Board or by voluntary organisations, such necessary equipment is provided on loan by the County Council.

Sitters-in can be employed by the County Council to go into homes to care for children both during the daytime and the night time in cases where, because of illness or for some other acceptable reason, the parents are not able to look after them. Persons availing themselves of the services of a sitter-in are required to contribute towards the cost of this service according to their means.

Since the scheme came into operation domestic help was made available in two cases and in one case kitchen utensils and bedding were issued on loan.

Under the Joint Circular issued by the Ministry of Health, the Ministry of Education and the Home Office on 31st July, 1950, the Children's Officer was appointed by the Council as the officer responsible for securing the co-ordination of all the services, both statutory and voluntary, dealing with the welfare of children in their own homes. This year regular standing case conferences of the officers dealing with these services were set up for the first time in Scunthorpe under the chairmanship of the District Medical Officer of Health who also holds the position of Assistant County Medical Officer. The conferences have continued at two-monthly intervals and have already proved to be a success. At each conference problem families in the area are discussed. These officers include health visitors and school nurses, district nurses, children's welfare officers, housing officers, district welfare officers, officers of the National Assistance Board, the assistant domestic help organiser, school attendance officers and officers of the N.S.P.C.C. and any others who may be called on through interest in a particular family. Each has an important role to play and in referring to them I have not placed them in any particular order of importance. The part played by each is complementary to the parts of the others.

It has thus been found possible to ensure that in every case everything possible is done for the welfare of the family and, what is extremely important, it has been possible to ensure that there is no overlapping and that nothing is being left undone by one social worker believing the job to have been put in hand by somebody else.

There are so many different officers whose duty it is to look after the welfare of children, either on account of their holding appointments with local authorities or with voluntary bodies and I cannot see how their work can possibly be co-ordinated satisfactorily without their getting together regularly as they are now doing in Scunthorpe. In my view it would be ideal if other standing case conferences were convened to cover the remainder of the County but unfortunately, owing to its rural nature, this may not be practicable in some areas and apart from Scunthorpe where conferences have been regularly held the Children's Officer has called together conferences to deal with specific cases where it has been obvious that an exchange of views in this way would help.

Sitter-In Service

In April, 1956, a sitter-in service was introduced with the aim in view of enabling some old people to continue to live in their own homes instead of being removed to hostels or to similar accommodation. Initially the scheme was limited to those cases where old people were living alone but was later extended to make it possible for sitters-in to be provided for infirm old people where no other arrangements could be made and where the alternative might be institutional care.

Persons availing themselves of this service are required to contribute towards the cost according to their means.

This service is supplementary to the domestic help service and there is no reason why the services of a sitter-in and of a domestic helper should not be provided for the same case.

During 1956 help was provided under the sitters-in scheme in 29 cases. A total of 5,228 hours was put in by sitters-in on these cases. There were 24 cases which were investigated but in which for one reason or another a sitter-in was not provided. There was, however, only one case where it was considered a sitter-in was necessary but where it was not possible to provide one.

DOMESTIC HELP SERVICE

There has been no change in the organisation and administration of the domestic help service during the past year. The staff consists of an organiser and three assistant organisers, one of whom is stationed at the branch offices of the service at Scunthorpe and Cleethorpes. Clerical assistance is provided for the organising staff in order that they can spend as much time as possible on the supervision of cases, an essential feature of a satisfactorily operated scheme. The County Council do not employ regular whole-time helpers but rely on women who are willing to act as domestic helpers as and when required. At 31st December there were 291 helpers actually being employed for varying periods of duty, an increase of 51 over the previous year.

One thousand, one hundred and twenty one applications for assistance were investigated by the organising staff compared with 1,014 in the previous year. Domestic help was provided in 909 cases compared with 726 in 1955. There were 212 applications made for help which did not result in help being provided. In most of these cases the applications were withdrawn after the nature of the service had been explained to the applicants. In 15 cases help, although needed, was not provided, owing to the fact that a helper could not be found in the locality where the applicant lived. There were 326 cases where help was recommended by such bodies as the National Assistance Board, the Women's Voluntary Services, by relatives or friends or in some other way, but where no application was made by the person concerned.

The following table shows the classification of the cases in which help was provided and the number of hours put in by domestic helpers on those cases.

<i>Category</i>	<i>No. of cases</i>	<i>Total No. of hours worked</i>
Maternity ...	82	4,411
Tuberculosis ...	5	904½
Chronic Sick ...	281	85,296¾
Aged and Infirm	431	102,708¾
Others	110	14,346¾
Total	909	207,667¾

There has been a tremendous increase in hours worked by helpers compared with the previous year. There appears to be two main reasons for it. Firstly, that part of the population living in the rural and thinly populated parts of the county have been slow to get to know about the service and it is noticeable that in these areas the service has been slower to develop than elsewhere in the county. Secondly, help is being provided for a considerable number of old and infirm people and it is usually the experience that once help is provided for such a case it is needed for a very long time. It will be seen from the above table that out of a total of 909 cases 431 were old and infirm and that out of a total of 207,667, hours 102,708 were put in on such cases. Although the domestic help service is costing a considerable sum of money, one must not lose sight of the fact that very often the provision of domestic help does make it possible for old people to continue to live in their own homes instead of going to hostels or taking up beds in hospital.

MENTAL HEALTH SERVICE

There have been no changes in the administration of the mental health service during the year. Very little is being done in connection with the prevention of mental illness and the after care of the mentally sick, to some extent owing to the fact that the County Council are without the services of a medical officer for mental health and a psychiatric social worker.

Mental Deficiency

The names of 61 mental defectives were added to the register during the year, most of them being newly ascertained cases. The names of 38 cases were removed from the register during the year either because of death or removal from the county or because of their being no longer in need of care and supervision.

The total number of mental defectives whose names were on the register at the end of the year was 1,153 compared with 1,130 at the end of the previous year.

Of the 61 new cases reported, 24 were children who had been found to be ineducable and had been referred by the Education Authority.

The 1,153 cases registered as mental defectives are placed in the following categories:—

Under Statutory Supervision	536	(including 122 on waiting list for institution)
In Institutions	... ..	456
Under Guardianship	... ..	6
Under Voluntary Supervision	155	

Supervision

The health visitors exercise supervision over defectives in their own homes. During the year 2,724 visits were paid in this connection.

Institutional Care

In the previous report attention was drawn to the serious shortage of institutional accommodation and it is only necessary for me to point out that the number on the waiting list has increased from 114 to 122 to illustrate that there has been no alleviation of the situation. Of these cases on the waiting list 58 are classed as urgent and last year only 15 vacancies were allocated to Lindsey cases, making little impression on the size of the waiting list as additional cases requiring insitutional care are arising all the time.

Once again advantage was taken of the provisions of Ministry of Health Circular 5/52 to secure the admission of cases to institutions for short periods in order to afford temporary relief to parents. During 1956 seven vacancies were obtained for these cases.

Guardianship

At the end of the year there were six cases under guardianship under the Mental Deficiency Acts.

Occupation and Training

The County Council have at present three occupation centres for mental defectives, one at Louth, one at Skegness and one at Gainsborough. A fourth is in course of erection at Scunthorpe. In addition the County Council have an arrangement with the Grimsby County Borough Council under which mental defectives from Cleethorpes and the nearby county area attend the Grimsby occupation centre.

These centres in the main cater for children up to the age of 16 years but there are some older mental defectives attending.

The numbers in attendance at the end of the year were as follows:—

Gainsborough	17	Skegness	...	25	
Louth	25	Grimsby	...	11

The arrangement introduced in 1955 for giving home tuition to mental defectives who were not able to attend an occupation centre has been extended. At the end of the year there were two home teachers on the County Council's staff, both of them having undergone training for occupation centre duties and awaiting the opening of the Scunthorpe centre. At 31st December, 1956, 33 mental defectives were being visited by these two home teachers.

During the year four trainees recruited under the County Council's scheme for training supervisory staff for occupation centres completed their training. One was appointed supervisor of the Gainsborough centre, another supervisor of the Skegness Centre and another assistant supervisor of the Louth centre. The fourth trainee found it impossible to take up an appointment with the County Council. Two other trainees commenced a course of instruction during the year.

Register of Mental Defectives as at 31st December, 1956

					Under age 16	Aged 16 and over		Total
					M	F	M	F
1. Particulars of cases reported during 1956								
(a) Cases ascertained to be defectives "Subject to be dealt with"...								
Number in which action taken on reports by:—								
(1) Local Education Authorities on children								
(i) While at school or liable to attend school ...					14	10	—	—
(ii) On leaving special schools ...					—	1	—	—
(iii) On leaving ordinary schools ...					6	4	—	—
(2) Police or by Courts ...					—	—	—	—
(3) Other sources... ..					3	1	5	5
(b) Cases reported who were found to be defectives, but were not regarded as "subject to be dealt with" on any ground ...					—	—	4	8
(c) Cases reported who were not regarded as defectives or in which action was incomplete at 31st December, 1956, and are thus excluded from (a) or (b) ...					—	—	—	—
Total					23	16	9	13
2. Disposal of cases reported during 1956								
(a) Of the cases ascertained to be defectives "subject to be dealt with" (i.e. at 1(a)), number...								
(i) Placed under Statutory Supervision ...					23	14	3	5
(ii) Placed under Guardianship ...					—	—	—	—
(iii) Taken to "Places of Safety" ...					—	—	—	—
(iv) Admitted to Hospitals ...					—	2	2	—
(b) Of the cases not ascertained to be defectives "subject to be dealt with" (i.e. at 1(b)), number ...								
(i) Placed under Voluntary Supervision ...					—	—	4	8
(ii) Action unnecessary ...					—	—	—	—
Total					23	16	9	13
3. Number of mental defectives for whom care was arranged by the local health authority under Circular 5/52 during 1956 and admitted to...								
(a) National Health Service hospitals ...					3	2	2	—
(b) Elsewhere					—	—	—	—
Total					3	2	2	—
4. Total cases on Authority's Registers at 31.12.56.								
(i) Under Statutory Supervision ...					95	82	197	162
(ii) Under Guardianship... ..					1	—	2	3
(iii) In "Places of Safety" ...					—	—	—	—
(iv) In Hospitals					30	14	226	186
(v) Under Voluntary Supervision ...					—	—	75	80
Total					126	96	500	431
5. Number of defectives under Guardianship on 31st December, 1956, who were dealt with under the provisions of Section 8 or 9, Mental Deficiency Act, 1913 (included in 4 (ii)) ...					—	—	—	—

					Under age 16		Aged 16 and over		Total
					M	F	M	F	
6.	Classification of defectives in the Community on 31st December, 1956 (according to need at that date)...								
(a)	Cases included in 4(i)-(iii) in need of care and reported accordingly to the hospital authority								
(1)	In urgent need of hospital care:—								
(i)	“cot and chair ” cases				3	4	2	2	11
(ii)	ambulant low grade cases				5	—	6	1	2
(iii)	medium grade cases				4	6	7	7	24
(iv)	high grade cases				1	1	2	7	11
Total urgent cases ...					13	11	17	17	58
(2)	Not in urgent need of hospital care:—								
(i)	“cot and chair ” cases				1	—	2	5	8
(ii)	ambulant low grade cases				3	5	3	—	11
(iii)	medium grade cases				3	—	16	12	31
(iv)	high grade cases				—	1	7	6	14
Total non-urgent cases					7	6	28	23	64
Total					20	17	45	40	122
(b)	Of the cases included in items 4 (i), (ii) and (v), number considered suitable for:—								
(i)	occupation centre				78	67	16	19	180
(ii)	industrial centre				—	—	11	16	27
(iii)	home training				—	5	4	3	12
Total					78	72	31	38	219
(c)	Of the cases included in 6(b), number receiving training on 31/12/56:—								
(i)	In occupation centre... ..				35	34	4	5	78
(ii)	In industrial centre				—	—	—	—	—
(iii)	At home				16	12	3	2	33
Total					51	46	7	7	111

Lunacy and Mental Treatment Acts

The Local Health Authority is responsible, through their Authorised Officers, for taking what proceedings are necessary under the Acts to provide care and treatment in hospital for persons suffering from mental illness. These Officers are mainly concerned in cases where certification and the making of statutory orders are necessary though they advise and assist in cases of voluntary admission.

The following is a summary of the cases dealt with in 1956.

Cases investigated	...	...	...	...	...	...	...	...	...	...	...	257
Admitted to Mental Institutions as certified patients under Section 16, Lunacy Act, 1890	...	...	...	...	...	...	...	...	...	...	...	108
Admitted to Mental Institutions on “Three Day Order” under Section 20, Lunacy Act, 1890	...	...	...	...	...	...	...	...	...	...	...	44
Admitted to Mental Institutions on “Fourteen Day Order” under Section 21, Lunacy Act, 1890	...	...	...	...	...	...	...	...	...	...	...	65
Admitted to Mental Institutions as voluntary patients under Section 1, Mental Treatment Act, 1930	...	...	...	...	...	...	...	...	...	...	...	3
Admitted to Mental Institutions as temporary patients under Section 5, Mental Treatment Act, 1930	...	...	...	...	...	...	...	...	...	...	...	1
No action taken	...	...	...	...	...	...	...	...	...	...	...	36

When patients needing after care are discharged from mental hospitals, the medical superintendents notify the local authority whose health visitors carry out visits and forward reports to the hospital superintendents. In 1956 10 new cases were referred from hospital and the health visitors carried out 183 visits. The total number of cases under supervision was 48.

NOTIFIABLE DISEASES

The following table gives details of notifications of infectious diseases made to District Medical Officers of Health during 1956. The total number of cases of infectious disease notified was 3,156 fewer than in 1955, due mainly to the fact that notifications of measles totalled 2,012 compared with 4,929 in the previous year.

Notified Cases of Infectious Diseases in Urban and Rural Districts, 1956.

Sanitary Districts	Total number notified	Scarlet Fever	Whooping Cough	Acute Poliomyelitis (Paralytic)	Acute Poliomyelitis (Non-paralytic)	Measles	Diphtheria and Membranous Croup	Pneumonia	Dysentery	Acute encephalitis (Infective)	Acute encephalitis (Post-infectious)	Erysipelas	Meningococcal Infection	Food Poisoning	Puerperal Pyrexia	Ophthalmia Neonatorum	Malaria (Believed to be contracted abroad).	Tuberculosis respiratory	Tuberculosis other forms
Urban																			
Alford	4	—	—	—	—	2	—	1	1	—	—	—	—	—	—	—	—	—	—
Barton-upon-Humber	41	—	29	—	—	7	—	1	—	—	—	—	—	—	—	—	—	3	1
Brigg	17	2	2	—	—	12	—	—	—	—	—	—	—	—	—	—	—	1	—
Cleethorpes Borough	206	47	73	—	—	8	—	23	3	—	—	6	2	1	13	1	—	24	5
Gainsborough	372	25	10	—	—	289	—	17	1	—	—	4	—	12	—	—	—	10	4
Horncastle	76	2	17	—	—	—	—	1	50	—	—	3	—	—	—	—	—	2	1
Louth Borough	28	5	—	—	2	5	—	—	4	—	—	—	—	—	1	1	—	9	1
Mablethorpe & Sutton	2	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	1
Market Rasen	12	8	—	—	—	3	—	1	—	—	—	—	—	—	—	—	—	—	—
Scunthorpe Borough	1244	34	85	—	1	908	—	32	137	—	1	7	5	1	3	—	3	20	7
Skegness	134	2	—	—	1	117	—	3	—	—	—	1	—	—	1	—	—	9	—
Woodhall Spa	22	5	5	—	—	—	—	10	2	—	—	—	—	—	—	—	—	—	—
	2158	130	221	—	4	1351	—	89	198	—	1	21	7	14	18	2	3	79	20
Rural																			
Caistor	94	7	47	—	—	24	—	4	—	1	—	2	—	1	1	—	—	5	2
Gainsborough	125	15	17	—	—	58	—	8	22	—	—	—	—	2	—	—	—	2	1
Glanford Brigg	345	4	70	1	1	226	—	7	21	—	—	—	—	—	—	—	—	10	5
Grimsby	75	16	34	—	—	9	—	4	—	—	—	—	—	—	2	1	—	4	5
Horncastle	371	5	47	—	2	96	—	12	203	—	—	1	—	4	1	—	—	—	—
Isle of Axholme	55	1	4	1	—	38	—	—	—	—	1	—	1	—	1	—	—	6	2
Louth	114	8	21	1	2	53	—	14	4	—	—	1	—	3	—	—	—	7	—
Spilsby	240	9	39	2	—	146	—	20	11	—	—	2	1	—	—	—	—	6	4
Welton	68	20	12	1	2	11	—	6	6	—	—	5	—	2	1	—	—	2	—
	1487	85	291	6	7	661	—	75	267	1	1	11	2	12	6	1	—	42	19
Total for County	3645	215	512	6	11	2012	—	164	465	1	2	32	9	26	24	3	3	121	39

Poliomyelitis

Seventeen cases of poliomyelitis were reported, of which 6 were paralytic and 11 non-paralytic. The corresponding figures for 1955 were 32 and 23. Of the paralytic cases 3 occurred in children under 5 years of age, 2 in children of school age and 1 in an adult. Of the non-paralytic cases, 1 occurred in a child under 5 years of age, 5 in school children and 5 in adults.

Diphtheria

It is pleasing to be able to report again that no case of diphtheria was notified during the year.

Dysentery

Once again the number of cases of dysentery notified has shown an increase. In 1953, 104 cases were notified, in 1954 the figure was 306, in 1955 the number was 430 and in the year under review the total was 465.

Ophthalmia Neonatorum

Three cases were notified during the year and a follow-up of these cases showed there was no impairment of vision.

Acute Rheumatism

By the Acute Rheumatism Regulations, 1953, acute rheumatism is made a notifiable disease in Lindsey when occurring in a child under the age of 16 years, and the following table gives details of cases notified under these Regulations in 1956. The total number of notifications received was 4, compared with 5 in 1955.

*Tabulation by age, sex and clinical classification of cases notified
as Acute Rheumatism during 1956*

Clinical classification of cases notified	Age in years								Total all ages in the age group		Total both sexes
	0-4		5-9		10-14		15				
	M	F	M	F	M	F	M	F	M	F	
1. Rheumatic pains and/or arthritis without heart disease	—	—	—	1	2	—	—	—	2	1	3
2. Rheumatic heart disease (Active) (a) with polyarthritis (b) with chorea ...	— —	— —	— —	1 —	— —	— —	— —	— —	— —	1 —	1 —
3. Rheumatic heart disease (Quiescent)	—	—	—	—	—	—	—	—	—	—	—
4. Rheumatic chorea (alone)	—	—	—	—	—	—	—	—	—	—	—
Total rheumatic diseases	—	—	—	2	2	—	—	—	2	2	4
5. Congenital heart disease	—	—	—	—	—	—	—	—	—	—	—
6. Other non-rheumatic heart disease or disorder	—	—	—	—	—	—	—	—	—	—	—
7. Non-rheumatic or cardiac disease	—	—	—	—	—	—	—	—	—	—	—
Total non-rheumatic diseases	—	—	—	—	—	—	—	—	—	—	—

Tuberculosis

The following table gives particulars of the incidence of tuberculosis during the years 1937 to 1956. The number of cases reported in 1956 was 212 and it is disappointing to have to record an increase of 10 over the figures for the previous year. There was, however, a fall of 10 in the number of deaths due to respiratory tuberculosis. The number of persons dying from tuberculosis who had not been notified during life as tuberculous was 6 compared with 4 in 1955.

Cases of tuberculosis reported from all sources, 1937-1956

Year	Respiratory	Non-respiratory
1937	242	105
1938	264	118
1939	241	118
1940	230	106
1941	198	118
1942	226	106
1943	252	113
1944	253	105
1945	305	104
1946	300	91
1947	311	78
1948	267	80
1949	211	52
1950	219	57
1951	250	60
1952	234	43
1953	224	45
1954	220	40
1955	178	24
1956	168	44

Summary of formal notifications during the period from the 1st January, 1956, to the 31st December, 1956.

	Formal notifications													
Age periods	0-	1-	2-	5-	10-	15-	20-	25-	35-	45-	55-	65-	75 and upwards	Total (all ages)
Respiratory males	—	—	—	2	2	10	9	9	7	11	13	7	2	72
Respiratory females	—	1	1	2	—	7	5	18	10	3	1	1	—	49
Non-respiratory males	—	—	—	4	4	2	1	6	1	3	—	—	—	21
Non-respiratory females	—	—	2	2	5	2	—	3	2	1	—	1	—	18

New cases coming to the notice of the Medical Officer of Health during the year, otherwise than by formal notification

Age periods	0-	1-	2-	5-	10-	15-	20-	25-	35-	45-	55-	65-	75 and upwards	Total cases
Respiratory males	—	—	1	—	—	2	3	5	10	3	—	—	1	25
Respiratory females	—	—	1	—	—	3	6	5	3	1	1	2	—	22
Non-respiratory males	—	—	—	—	1	—	—	—	—	—	—	—	—	1
Non-respiratory females	—	—	—	—	—	—	—	2	2	—	—	—	—	4

Venereal Disease

The following tables give details relating to the incidence of venereal disease. The number of cases of Syphilis and Gonorrhoea under treatment in 1956 was 130 compared with 131 in the previous year.

New cases reported each year since 1943

Year	Syphilis	Gonorrhoea	Total
1943	74	156	230
1944	78	132	210
1945	85	115	200
1946	130	220	350
1947	166	196	362
1948	72	122	194
1949	59	63	122
1950	63	46	109
1951	49	42	91
1952	37	44	81
1953	18	43	61
1954	33	36	69
1955	18	31	49
1956	14	32	46

Number of cases of Syphilis and Gonorrhoea under treatment during the year 1956 at clinics situated in the County.

Clinic	Syphilis	Gonorrhoea	Total
Gainsborough ...	19	4	23
Louth	20	—	20
Scunthorpe ...	54	20	74
Skegness ...	6	7	13
Total ...	99	31	130

WELFARE OF HANDICAPPED PERSONS

General

Under Sections 29 and 30 of the National Assistance Act, 1948, the County Council have power to make arrangements for promoting the welfare of persons who are blind, partially sighted, or deaf and dumb, or who are substantially and permanently handicapped by illness, injury or congenital deformity, and where the Minister of Health so directs are under an obligation to exercise such powers. The Minister has issued such a direction in the case of blind and partially sighted persons and the County Council has for many years had a scheme for the welfare of such classes. The County Council again gave prolonged consideration to the question of providing a service for the welfare of handicapped persons other than the blind and partially sighted and the deaf and dumb and eventually formally adopted a scheme based on the model scheme prepared by the Ministry. Detailed proposals were submitted to the Council for operating the scheme, involving the appointment of almoners to deal with the social work and occupational therapists to give instruction in crafts and handicrafts with the aim of improving where possible the function of the diseased or damaged part, to provide occupation for the patient to maintain his interest and to bring him to a stage where he can earn some money from the sale of the goods he makes or by accepting “ outwork ” from factories, etc.

No decision had however been reached at the end of the year on the question of how and when the scheme should be implemented.

A conference of representatives of local authorities in Lincolnshire was held during the year to explore the possibility of adopting a joint scheme for the welfare of the deaf and dumb in the geographical county but no definite proposals had been formulated at the end of the year.

Blind and partially sighted persons

During the year 112 new cases were registered, 67 of these being blind and 45 partially sighted. The corresponding figures for 1955 were 91 blind and 29 partially sighted. At the end of the year the register contained the names of 576 blind persons and 134 partially sighted persons compared with 574 and 94 respectively for the previous year.

The following tables give details of new cases registered as blind and partially sighted in 1956, indicating the cause of the eye defect and the age at which it occurred.

Blind—New cases registered in 1956

Cause of Eye Defects					Age at which blindness occurred							Total	%	
					0-5	5-16	16-20	21-39	40-49	50-59	60-69			70+
1.	Cataract	...	...	...	—	—	—	—	1	—	2	18	21	31.34
2.	Senile Macula Degeneration	...	...	...	—	—	—	—	—	—	1	13	14	20.89
3.	Glaucoma	...	...	...	—	—	—	—	—	2	2	2	6	8.96
4.	Optic Atrophy	...	...	...	1	—	—	2	—	—	—	2	5	7.46
5.	Retinitis	...	...	...	—	—	—	—	—	1	—	3	4	5.97
6.	Myopia	...	...	...	—	—	—	1	—	—	2	—	3	4.48
7.	Retinal Dystrophy	...	...	...	—	—	—	—	—	—	—	2	2	2.99
8.	Detachment of Retina	...	...	...	—	—	—	—	—	—	1	1	2	2.99
9.	Thrombosis	...	...	...	—	—	—	—	—	—	—	2	2	2.99
10.	Septicaemia	...	...	...	—	—	—	1	—	1	—	—	2	2.99
11.	Diabetes	...	...	...	—	—	—	—	—	1	—	—	1	1.49
12.	Iritis	...	...	...	—	—	—	—	—	—	1	—	1	1.49
13.	Irido-cyclitis	...	...	...	—	—	—	—	—	—	—	1	1	1.49
14.	Choroiditis	...	...	...	—	—	—	—	—	—	1	—	1	1.49
15.	Cerebral Tumour	...	...	...	—	—	—	—	1	—	—	—	1	1.49
16.	Schilders Disease	...	...	...	1	—	—	—	—	—	—	—	1	1.49
Grand Total					2	—	—	4	2	5	10	44	67	
Percentage					2.99	—	—	5.97	2.99	7.46	14.92	65.67		100.00

Partially Sighted—New cases registered in 1956

Cause of Eye Defects					Age at which partial sight occurred							Total	%	
					0-5	5-16	16-20	21-39	40-49	50-59	60-69			70+
1.	Cataract	...	...	...	—	—	—	1	—	2	2	9	14	31.5
2.	Senile Macula Degeneration	...	...	...	—	—	—	—	—	1	—	8	9	20.0
3.	Glaucoma	...	...	...	—	—	—	—	—	1	1	3	5	11.1
4.	Myopia	...	...	...	—	—	—	—	—	—	—	2	2	4.4
5.	Optic Atrophy	...	...	...	—	1	—	—	—	—	—	1	2	4.4
6.	Retrolental Fibroplasia	...	...	...	2	—	—	—	—	—	—	—	2	4.4
7.	Thrombosis	...	...	...	—	—	—	—	—	—	1	1	2	4.4
8.	Diabetes	...	...	...	—	—	—	1	—	1	—	—	2	4.4
9.	Choroiditis	...	...	...	1	—	—	—	—	—	—	—	1	2.2
10.	Retinitis	...	...	...	—	—	—	—	—	—	1	—	1	2.2
11.	Nystagmus	...	...	...	1	—	—	—	—	—	—	—	1	2.2
12.	Subluxation of lenses	...	...	...	1	—	—	—	—	—	—	—	1	2.2
13.	Retinal Dystrophy	...	...	...	—	—	—	—	—	—	—	1	1	2.2
14.	Interstitial Keratitis	...	...	...	—	—	1	—	—	—	—	—	1	2.2
15.	Scleritis	...	...	...	—	—	—	—	—	1	—	—	1	2.2
Grand Total					5	1	1	2	—	6	5	25	45	
Percentage					11.1	2.2	2.2	4.4		13.4	11.1	55.6		100.00

In respect of the new cases registered in 1956, the following table gives details of the cause of the disability and indicates whether treatment was recommended or not and if it was, the number of cases in which it was received.

	<i>Cause of disability</i>			
	<i>Cataract</i>	<i>Glaucoma</i>	<i>Retrolental Fibroplasia</i>	<i>Other</i>
(i) Number of cases registered during the year in respect of which para 7(c) of Form BD8 recommends				
(a) No treatment ...	15	5	1	45
(b) Treatment (Medical, Surgical & Optical) ...	21	4	1	20
(ii) Number of cases at (i) above which on follow up have received treatment ...	10	3	1	16

It will be noted that treatment was recommended in 46 cases and only obtained in 30. Of the 16 cases where treatment had not been provided the position was as follows:—

- 4 persons refused treatment
- 6 persons were awaiting admission to hospital
- 2 persons were unfit to undergo treatment
- 2 persons had died
- 2 persons were awaiting the completion of arrangements for treatment

The following table from the annual report of the Lindsey Blind Society shows the position of blind and partially sighted persons in the County as regards education, training and employment at 31st December, 1956.

Blind Persons

	<i>Males</i>	<i>Females</i>	<i>Total</i>	<i>% of Total</i>
Children under 2				
At Home	1	—	1	.17
Children 2-4 plus				
<i>Educable</i>				
Attending Special Schools	1	—	1	.17
At Home	—	2	2	.34
<i>Ineducable</i>				
M.D. Institutions	1	—	1	.17
At Home	—	1	1	.17
Children 5-12 plus				
<i>Educable</i>				
In Special Schools	3	2	5	.86
<i>Ineducable</i>				
M.D. Institutions	1	—	1	.17
At Home	1	1	2	.34
Employed				
Workshops for the Blind	10	—	10	1.73
Home Workers	15	5	20	3.47
All Others	23	6	29	5.03
Undergoing Training				
Open employment	—	2	2	.34
Sheltered employment	1	—	1	.17
Not Employed				
<i>Already trained</i>				
Open Employment	3	—	3	.52
<i>Subject to being trained</i>				
Open Employment	1	—	1	.17
<i>Without training</i>				
Open Employment	1	—	1	.17
<i>Not available for employment</i>				
(a) 16-59	14	35	49	10.71
(b) 60-64	3	10	13	
<i>Not capable of employment</i>				
(a) 16-59	13	24	37	75.30
(b) 60-64	11	12	23	
(c) 65 and over	139	234	373	
Totals	242	334	576	100

Partially Sighted Persons

Classification								Male	Female	Total	% of total
A. Prospective Blind											
Persons (other than children) who are near blind and likely to become blind and to need the full range of blind welfare services											
1.	Employed	...	...	...	...	...	...	—	1	1	.75
2.	Undergoing training	...	...	...	...	...	...	—	—	—	—
3.	Unemployable but available for and capable of training or work	...	...	...	...	...	...	—	—	—	—
4.	Incapable of or not available for work	...	...	...	...	...	...	14	40	54	40.30
B. Industrially Handicapped											
Persons (other than children) whose principal needs are likely to be met by proper placement in industry											
1.	Employed	...	...	...	...	...	...	9	3	12	8.95
2.	Undergoing training	...	...	...	...	...	...	—	—	—	—
3.	Unemployed but available for and capable of training or work	...	...	...	...	...	...	4	—	4	2.99
4.	Incapable of or not available for work	...	...	...	...	...	...	2	—	2	1.49
C. Requiring observation											
Persons (other than children) whose defect is neither industrially nor socially a serious handicap and whose vision may or may not deteriorate											
		...	...	...	...	...	...	17	22	39	29.10
D. Children 5-15 plus											
1.	Attending Special Schools	...	...	...	...	...	...	9	—	9	6.72
2.	Attending other schools	...	...	...	...	...	...	3	4	7	5.22
3.	Educable but not at school	...	...	...	...	...	...	3	—	3	2.24
4.	Ineducable	...	...	...	...	...	...	1	—	1	.75
E. Children 1-4 Plus											
		...	...	...	...	...	...	2	—	2	1.49
Totals								64	70	134	100

NURSERIES AND CHILD MINDERS REGULATION ACT, 1948

There is one nursery in the County registered under this Act. It is run by a voluntary Committee at Skegness, is open only during the holiday season and provides places for 25 children. The County Council made a grant during the year towards the cost of running the nursery.

At the end of the year only one person was registered under the Act as a daily minder.

PUBLIC HEALTH ACT, 1936—REGISTRATION OF NURSING HOMES

One nursing home was registered during the year, bringing the number on the register at the end of the year to seven. These homes provide beds for 111 cases.

C. D. CORMAC,

County Medical Officer.

